THE LANCET.

VOL. II.] LONDON, SATURDAY, JULY 25, 1835. [1834-35.

PAINFUL CREPITATION OF THE SHEATHS OF TENDONS.

THE affection denominated by some surgeons "painful crepitation of the sheaths of the tendons," was first noticed in a very cursory manner by Boyer, but it has only been within the last five years that it has been studied with any attention. M. Velpeau of *La Charité* was the first surgeon who described it in a precise manner. He did so in 1818; since then various practitioners have given us a sufficiently faithful account of a disease which, though it has not yet found a place in surgical works, deserves some attention on the part of the practical surgeon.

The wrist and ankle joints, as every one knows, are surrounded by a number of tendons, many of which are furnished with peculiar aponeurotic sheaths, confounded above and below with the fibrous envelope of the muscles of the limb. These aponeurotic sheaths are the seat of the disease of which we speak; in most cases it is produced by forcible and long-continued tension of the tendons themselves; at other times by external violence; it is also most frequently seen in persons whose trade requires violent flexion or motion of the wrists and fingers, as in washerwomen, locksmiths, masons, woodcutters, &c.

The principal symptoms are, a swelling, of variable form and dimensions, along the affected parts; pain and redness of the skin, and particularly a crepitation, which sometimes resembles that of fracture so closely that the best surgeon may be mistaken in his diagnosis if he pay too much attention to this latter symptom. The swelling, which rarely exists to any considerable extent, is usually very sensible, but in some few cases so slight as not to be perceived without a minute examination. The pain is most slight when the limb remains at rest, but is always augmented by motion of the limb, or whenever the surgeon presses upon the part, or communicates any motion to the inferior extremity of the limb; the tumour also is usually prolonged a little along some one of the aponeurotic sheaths, but no deformity whatever of the member can be observed. But the most important symptom, in fact, the pathognomic sign of the disease, is a crepitation generally resembling that heard in the first period of pneumonia, but on some occasions sufficiently strong to be mistaken for the noise produced by rubbing together the two fragments of a broken bone; it is, however, in general much more feeble, and, according to M. Velpeau, resembles the sound produced by walking in a hoar-frost, or over snow when it has frozen. The only disease with which the affection we now speak of is liable to be confounded, is the straining of the ligaments about a joint or a fracture. In some of the former cases we find a kind of crepitation, and it is highly probable that here the two diseases coexist; besides, any error cannot be of practical consequence. Fracture of the inferior extremity of the radius has, it would appear, been frequently confounded with the tendinous crepitation. It was upon an occasion of this kind that M. Velpeau had first an opportunity of remarking the affection. It occurred at the Hospital of Tours in 1818:—

A young cabinet-maker came to the hospital to have the splints arranged which a surgeon had applied for supposed fracture of the radius. On removing the dressings, M. Velpeau wished to ascertain the existence of the fracture, and on mov-

ing the thumb, was soon convinced that the crepitation alone had given rise to the idea of a fracture, which did not exist. However, a careful comparison of the symptoms will in a great majority of cases suffice to prevent any error. As crepitation of the tendinous sheaths is a slight affection, and constantly is removed by rest, compression, and the use of resolvent applications, no opportunity has as yet occurred of ascertaining its exact seat, which is probably in the synovial membrane, and not in the fibrous tissue itself.

The treatment of this disease is sufficiently simple. When the pain is considerable, and joined with some redness of the skin, it is natural to apply leeches; antiphlogistics do not seem to have much effect. The most successful treatment consists in the application of a roller round the swollen part, drawn moderately tight, and moistened with some camphorated spirits of wine, or any other resolvent; by this means the swelling, pain, and crepitation, generally disappear in a week or two.

This affection, though one of frequent occurrence, has not, as far as we remember, been made the subject of any communication in any of the English periodicals. M. Velpeau cites from twenty-five to thirty examples, which he has already met with in the sheath of the perœneal muscles, extensors of the thumb, radial extensors, and extensor communis digitorum; and cases are now to be seen daily at the consultations of all the hospitals. In two cases treated by M. Velpeau in 1831-2, the disease terminated in a fungous degeneration of the tendinous sheaths of the phalanges.

We have derived the greater part of our information on the above subject from a paper by M. Paulin, in the *Gazette Medicale de Paris*, the four numbers of which, from 24 to 27, contain the following original articles:—

1st. Memoir on Exostoses, their Causes and Mode of Development, and the Accidents produced by them. Second part. By M. Rognetta.

2nd. On the Crepitation of the Sheaths of Tendons. By L. M. Paulin.

3rd. Observations on the Intestinal Hemorrhages of Young Infants. (Extracted from vol. 1 of *Schweiz. Zeit.* &c. 1834.) By C. Rahn-Escher. (We have already noticed this article.)

4th. Memoir on the Cholera of Marseilles in 1834-5, and particularly on the Use of Mercurial Frictions in Large Quantities, as a Remedy for the Disease.

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4. Memoir on the Cholera of Marseilles, &c.

The object of this memoir is to prove the great efficacy of mercurial frictions in high doses, in this destructive disease, but we regret to say that it wants that precision, that attention to the numeric method, which alone can inspire any confidence in conclusions drawn from medical facts.

During the first two months of its invasion, the march of the cholera at Marseilles was slow. On the 19th of February it began to assume a more formidable aspect, and continued to increase in intensity until the 1st of March, the period of its maximum; the disease now declined slowly for a week, and disappeared at the commencement of April; the mortality was 800 in a population of 140,000. It is necessary to note these circumstances, because, in the seventeen cases reported at some length by Dr. Robert, and in which mercurial frictions produced a speedy cure, only three occurred during the period of aggravation; the rest either preceded the 19th of February, or followed the 1st of May. The quantity of mercurial ointment rubbed in was about two or three ounces in the twenty-four hours; a scruple of cinnabar was added to each ounce, in order to give it more activity; the other remedies employed were very insignificant. The following case may serve as an example of the period at which the remedy was given, and the result produced.

Case. — Madame R., wife of a physician, attacked 29th of December 1834, with vomiting, diarrhœa, and colicky pains at seven o'clock a.m. The matter passed was white and serous; cramps now set in, and the patient got rapidly worse, in spite of every means employed by her husband and another physician. At two o'clock p.m., the face and extremities were blue, the whole body was cold, pulse insensible. Mercurial frictions on the lower extremi-

ties were now tried, and the violence of the cramps immediately abated; they were repeated very frequently, and at six o'clock p.m. the patient's state seemed improved; before morning six ounces of double mercurial ointment were rubbed in; from this moment the improvement went rapidly on, and the patient was well in a few days. The secretion of urine did not take place before the third day. It should be remarked that this was the first case in which mercurial friction was tried, and that the sixteen individuals who up to that time had been attacked by cholera, were all dead within fourteen hours after the invasion.

It is unnecessary for us to analyze the sixteen cases which follow the above; the following however is very remarkable:—

Case.—Martini (Demetrius), twenty-four years of age, was suddenly attacked with vomiting and cramps. When called on, the author found him with extremities cold, the voice extinct, the pulse insensible to the touch, and violent cramps; within an hour after the invasion the extremities were blue. Cold water was ordered for drink, with a lavement of starch, and poppy-heads infusion, and frictions with three ounces of mercurial ointment. The symptoms of cholera were removed in twenty-four hours.

In most of the cases reported by M. Robert the symptoms were very intense, and their removal as sudden whenever the frictions were carefully employed. As we said before, seventeen cases are given; in all the success was constant, but we are unable to ascertain whether M. Robert treated any other cases in the same manner with different success, or whether, in fact, he cured all the persons who fell under his care; indeed, the latter conclusion is scarcely probable, for we find that of the seventeen cases alluded to, fifteen are furnished by MM. Reveret and Daimé, while only two belong to this gentleman himself; as it is impossible to believe that M. Robert has treated only two cholera patients, we find ourselves compelled to suspend any judgment upon the remedy he advocates, until we know in a more precise manner the relation of the deaths or cures to the whole number treated. We should not omit to mention that salivation never followed in any case, although the quantity of strong mercurial ointment rubbed in sometimes amounted to several ounces.

NEW METHOD OF FORMING AN ARTIFICIAL PUPIL.

The following method is described by M. Langier, *Hopital Neckar*:—

The subject of the case operated on, a man 60 years of age, had been operated on by another surgeon last year, for cataract affecting both eyes: extraction was the method employed, but the result was unfortunate; the left eye was now empty, and the sight of the right eye was destroyed by complete atresia of the iris, the cornea continuing transparent in its whole extent. The operations generally employed for artificial pupil are, it is well known, singularly unsuccessful. The vertical, transverse, or even crucial incision, hardly ever answers. The V incision of M. Maunoir generally gives rise to an effusion of blood which mars the rest of the operation; and as the cornea was throughout transparent in the present case, decollement of the iris was not to be thought of, as the new pupil would not have been central. M. Langier therefore determined on dividing the cornea as for extraction, and then cutting off a portion of the iris, but on pushing through Richter's knife, the aqueous humour escaped, the iris became applied closely against the back of the cornea, and the point of the knife became engaged in the membrane; under these circumstances he thought it better to change the plan of operating; and having taken the depression needle, he introduced it through the wound in the cornea, and making it act as a lever, he succeeded in perforating the central part of the iris by laceration, with very little effort, and without giving rise to any hemorrhage.

The operation was followed by some little pain and inflammation, accidents speedily combated by the usual treatment, and the patient now presents a large, quadrilateral, irregular, and nearly central pupil, and moreover enjoys the full power of sight. The only question which can be agitated here is, did the cataract needle act on the iris itself, or did it merely lacerate the adherences of the pupillary edge; the author thinks the latter, because a portion of the centre, which before the operation was pale and wrinkled, has now disappeared.

In whatever light we regard it, the operation deserves to be repeated in cases of atresia, after extraction or depression, when the cornea remains transparent: it is superior evidently to detachment after Scarpa's method: it is much more easily executed than excision, and is less liable to be followed by obliteration than incision.

ABSTRACT OF THE EVIDENCE OF

MEMBERS OF THE ROYAL COLLEGE OF SURGEONS IN LONDON,

TAKEN BEFORE THE

PARLIAMENTARY MEDICAL COMMITTEE IN 1834.

EVIDENCE OF MR. BENJAMIN TRAVERS.

350. "You are a member of the Council of the College of Surgeons, and surgeon to St. Thomas's Hospital, and have been present during the examination of Mr. Brodie?"—"Yes; and in the main I agree with Mr. Brodie; but I am doubtful whether there should not be some restrictive or prohibitory enactment. Without that, we should probably be in a worse condition than we were before the passing of the Apothecaries' Act. For although it was, perhaps, wrong to invest that body with such extensive powers, nevertheless the profession is under much obligation to it. With every objection to monopolies, I think that all persons who are to be entrusted with the health of his Majesty's subjects should be obliged, before they are permitted to practise, to come before a Board of Examiners composed of deputations from the Councils of the several Colleges."

Now, reader, to "agree in the main with Mr. Brodie," is to advocate many good principles with much bad practice. But the good principles which Mr. Travers advocates we can no where discover from his evidence; the perusal of which we began, in fact, with an impression, that Mr. Travers was very ignorant even of his own opinions. We soon discover, indeed, that to defend the monopoly of the College of Surgeons, or to support some other monopoly which should be equally profitable to Mr. Travers and his colleagues, was the only point which he had in view. A new code of good medical laws will have to be founded on three or four very simple principles, from every one of which Mr. Travers either expresses his dissent, or anxiously travels in order to support some contrary scheme. Thus, One Faculty, elected by its members, whose examinations are public, whose diplomas shall be the only license to practise, and all of whose members shall possess equal privileges (extra honours having nothing to do with rights to practise, or privileges of election); these propositions embrace every point for which medical reformers need contend, and all who do not profess them as a creed, rank on the other side. Premising thus much, we proceed to give a faithful outline of the effeté suggestions, the crude opinions, the untenable propositions of Mr. Travers, whose name, by-the-by, we meet with in this Report for about the first time that we have seen it in print these ten years.

351. "In what way would you restrict unqualified persons from practising?"—"I suppose a fine might be imposed, to be recovered by a common informer."

352. "Do you approve of two grades in surgery?"—"Yes, I do."

352 (*a*). "Would you confer degrees on those of the higher grade?"—"Yes, but I am disposed to think that there would be no great value attached to the title of doctor in surgery, but perhaps a class of fellows of the College, and another of licentiates, might be adopted."

353. "Admission to the fellowship you would make to depend upon admission into the higher grade?"—"Certainly."

354. Now, reader, we stated a few sentences ago, that we began to analyse the evidence of this witness with a decided impression that he had sat himself down before the Committee in almost total ignorance even of his own opinions on medical education and government. No great penetration was necessary to the discovery of that fact, after reading the reply which he gave to the very first question. The opinion was a perfectly safe one to hazard. Whether Mr. Travers was right or wrong in the views he expressed in that answer, is not a point that we desire to moot; but let it be observed, that he then said (see paragraph 350), "I think that all persons who are to be entrusted with the health of his Majesty's subjects, should be obliged to come before a Board of Examiners, *composed of* DEPUTATIONS *from the Councils of the several Colleges;*" in other words,—words which Mr. Travers would himself have used, had he thought of them at the time,—before a GENERAL BOARD. Now in the very next page of the folio evidence, a question is recorded which fully exposes the unsettled state of mind in which Mr. Travers came forward to eclipse with the great shadow of his

opinions, the effulgent light of medical reform. We take some pains to make prominent the mental imbecility of the witness, because we regard the unstendiness of sentiment and want of principle which he so soon evinced, as at once definitive of his claim to pass judgment on the rights and privileges of his professional brethren. The Chairman said to him,—"If the six years now required to be passed in the acquirement of professional knowledge should be altered to three years of *bona fide* education, should the College of Surgeons and Company of Apothecaries come to an agreement respecting the course of study and examination to be required of all candidates for general practice?"—*Mr. Travers.* "Certainly. But *I am doubtful, again, whether the plan of a* GENERAL BOARD *would work well.* I am rather of opinion that it would be better that the Councils of the three corporations, and a council to be appointed by the accoucheurs, should *each constitute a separate board;* and that students, who are twenty-one years old, at least, should *present themselves for examination* before *each of those boards.*"—And, oh! reader! Pray attend to the rubbish that follows—the extravagant nonsense about accoucheurs as a *distinct* and very important *body*,—their *conventional* habits,—their *more-surgical-than-medical transactions*,—their almost exclusive practice among *females* (Ah! ah!)—their *hospitals*, &c. &c. Why there is not a surgeon in general practice in all England (and *every* surgeon but about 200 in England *is* occupied in general practice) who is not also an accoucheur!—Mr. Travers says, in giving his reasons for his being "doubtful" *now* about a general board, "I do not see how, otherwise, to provide for that very important body, the *accoucheurs;* who, though their business belongs more strictly to *surgery* than to *medicine or pharmacy*, yet, from the great importance of their occupation, their *conventional* habits of study and practice, their almost exclusive practice among *females*, and their having separate and detached *hospitals*, at least in great cities, are *quite worthy to be formed into a faculty or college of themselves.* I am doubtful whether the separate deputations would co-operate congenially, and examine advantageously, in the presence of each other; and whether it would not be a more operose process, and require more time, than either of them could conveniently spare. It would be better, therefore, that the student should present himself for examination before *each* of those boards *in succession*, and that *each* should examine *in its own department:* the physicians, in medicine; the surgeons, in surgery; the accoucheurs, in midwifery; the apothecaries, in materia medica and pharmacy."—With a board of donkeys,—not inappropriately to examine the Traverses. This is, in fact, the examination by BATTLEDORE-and-SHUTTLECOCK of Sir Astley Cooper.

355. "Would you exclude accoucheurs from the Council of the College of Surgeons?"—"YES, but from no disrespect to them, as a body. I think they would be misplaced there."

356. "Would you restrict the electors of the Council of your College to the members of the higher grade in surgery?"—"Yes, I would, and the electors should be excluded altogether from practising pharmacy. *The character of surgery would be compromised if general practitioners were to form part of the governing body of the College of Surgeons.* I would exclude even those who, without keeping open shop, dispense medicine to their own patients; for I can hardly appreciate any difference in the two cases."

357. "But in Edinburgh there are many first-rate surgeons, who dispense medicine to their own patients?"—"Yes, I know it, and I admit the difficulty of the case. But *if* they have attained to eminence, or are *anxious to do so*, they must venture upon *foregoing that practice*, and *breaking through the usage*: and if they attached much value to the Fellowship of the College, I think they would not hesitate to do so. The case bears especially hard upon the provincial hospital surgeons."—BEARS ESPECIALLY HARD UPON THEM! Was the impudence of this ever equalled? Why who created the hardship? Imagine a great, cunning, malicious, hungry serpent to have darted from a forest brake upon some vast buffalo, and so, holding with its tail by the trunk of a tree, entwining its lengthened and disgusting form around the body of the herculean animal, exclaiming as it crushes the defenceless frame,—with the gift of speech which belongs to human serpents,—"Poor beast! How do I deplore your situation! My body bears *especially hard* upon you; but if I do not crush your bones, I shall have no food."

358. "Would not this rule exclude from the class of electors a very large body of the most eminent country surgeons?"—"It would; but, I think, *they should forego the gain, and act together.* If they attach value to this distinction, and are qualified to be teachers, they may be appointed to hospitals and professorships, and to the highest honours of the profession. If they were not willing to make the sacrifice, they would not place this distinction at a *sufficiently high value.*" (Most inso-

lent monopolist.) "I am quite aware of the *respectability* of the class, and how many instances there are of persons belonging to it who are entitled by their attainments and their talents to stand with any members of the profession. But, as I said before, *I cannot consent to compromise the character of the surgeons of the metropolitan cities of London, Edinburgh, and Dublin.*"—To compromise the character of Benjamin Travers by placing it in comparison with that of men who "are entitled to stand with any members of the profession"!!!

359. "Considering how very large a majority of surgeons combine pharmacy with surgery, can it be expected that any arrangement will be satisfactory to them which continues to draw a line of positive exclusion of the whole of that majority from the Council?"—"I do not think the case would be so hard as it is at present. We should have no security that a majority of the Council, if we gave them the right of voting, would not very presently consist of *surgeon-apothecaries.*"

360. "The large majority of them who cannot afford to abandon pharmacy, what inducement would they have to take your higher path of study and of examination, if you withhold from them distinctions and the privilege of becoming electors?"—"I would hold it out to them with that condition alone. So long as they practised pharmacy, they should neither elect, nor be eligible to election into the Council, or the Council would soon consist of a majority of general practitioners."

361. "Would you prevent a man from teaching medicine because he practised pharmacy?"—"Yes, I should. I think teaching and pharmacy would not go well together. I would not permit men of the *lower grade to undergo the higher examination*, unless they previously made *shipwreck of their pharmacy*. That should be the condition, the *sine quâ non*, of the qualification for the higher examination. Whatever the course of study, the *knowledge*, or the *experience*, of the party might be, unless he would consent to abstain from practising pharmacy, I would not *admit him to examination for the higher grade!*"—Now, reader, pause for a moment; peruse again, attentively, the latter statements and opinions of this witness, from paragraph 356 to 361, and say whether you think that any name of reproach, any term of contempt, disgust, or reprobation, which can be applied to a man of bad principles of government and legislation, would be too strong or undeserved if applied to the witness under examination. And this witness is a councillor in one of the governing bodies of the medical profession of England!

362. "Do you approve of the conditions which now govern the College in deciding on the recognition of schools of anatomy and surgery?"—"I do."

363. "Are many of the country schools extremely good for medical instruction?"—"Yes."

364. "Among the advantages of country hospitals it is alleged that the expense of a medical education at them is much reduced?"—"I confess that such a consideration *does not strike me as one of importance*; and I doubt very much whether it is advantageous for a young man to remain under his parent's roof when he takes up the earnest study of his profession. It injures the independence of his character. The arguments in favour of passing a part of the course of study in London, or the two other metropolitan cities, appear to me to be quite unanswerable, though a perfect uniformity of regulation, as to the course of study and examination, and of professional honours, should prevail in the three great cities of this kingdom. There is a sort of general concurrence on the great points of practice established in these cities, which enables all British subjects to understand each other, and to use the same conventional language; and, without this, the Birmingham, Manchester, Liverpool, and Leeds schools would soon have a language of their own, which would be as foreign to us as those of the French and Italian schools. Country hospitals are not so crowded with pupils, and they allow more time, of course, for study, but then as schools of medicine, the instructors in them, *en masse*, are generally speaking not so competent as those in the London schools, and the student does not derive the same advantages from them. Indeed I do not think that, by itself, the country hospitals should be allowed to afford a qualification even for *the lower grade* of the profession, certainly not for the higher, but that six months, at least, should be spent in a London hospital, and even more would be desirable."

365. "Are the medical and surgical cases separated at St. Thomas's Hospital?"—"They are."

366. "Was it the rule, some years ago, that in a case requiring external and internal treatment, the surgeon attended to the surgical treatment, and the physician to the medical treatment of the patient?"—"Yes, it was."

367. "How long ago has that rule been rescinded?"—"It was not formally rescinded until about seven years ago; but before that there was a gentlemanlike

understanding and concession of the point between the physicians and the surgeons. The surgeons had their prescriptions prepared, though in this they were obliged to be very cautious. The apothecary, of course, did not like the additional trouble of compounding the surgeon's prescriptions; and therefore the thing was done, more by an understanding than by actual permission. I was elected to the hospital in 1815, and I remember that, for many years after, we literally could not prescribe beyond a black draught, or a dose of opening medicine."

368. "Was that by order of the governors?"—"It was; and a most grievously injurious system it was."—These are the *governors* who Sir Astley Cooper told the Chairman (see paragraph 305), are and always had been the best judges of the men who should be elected to fill the medical offices in the London hospitals. "I think the present system of election (by governors)," said he, "is *an excellent one*. They *must know* whether the candidate is *a qualified* person."

369. "Suppose, in a case of mortification, not admitting of delay, the surgeon and the physician differed upon the treatment of the patient; how were they to arrive at a decision?"—"I have always had the good fortune to have a colleague (for we have each a colleague according to our standing) who has been too much of a gentleman to interfere with the treatment of my cases; and I have no doubt that others have had the like good fortune. The physicians generally prescribed at our request, and according to our discretion; or countersigned our prescriptions."

370. "Would you propose that in the new constitution of the College, branch-practitioners, such as oculists and aurists, should be excluded from the higher grade?"—"Yes. Among physicians, one has had a reputation for diseases of the lungs or heart; and another, for diseases of the liver; and if a surgeon has been attached to an eye infirmary, and has acquired some reputation in that capacity, he will be followed by persons afflicted with eye diseases, although he may use every possible exertion to induce the public to consider him as practising surgery generally, for which he has the same qualifications as other hospital surgeons."

371. "Why, in the case of a surgeon who is able to practise general surgery, but who from his opportunities of paying special attention to the uterus, the public consider as devoting his practice to midwifery, should you refuse to admit him into the higher grade of the profession?"—"Midwifery is *sui generis*, and should have its own college."

372. "But suppose that it has no separate college, why should the man who is able and willing to practise general surgery, if he has acquired reputation in eye or ear surgery, or in the surgery of the uterus, be excluded from the higher grade?"—"I am supposing that the person does premeditatedly confine his practice to the treatment of the diseases of one organ."

373. "Is not a large share of the practice of modern surgeons medical?"—"Certainly, and considering the great knowledge that well-educated surgeons * have of the principles of medicine, it is desirable that it should be so."

374. "Do you see any good reason for excluding physicians from practising surgery?"—"A man had better keep to his own department. *The work is better done* if men keep in their own places, and it would be *infra dignitatem* for a physician to perform operations."—Alas for the witness! surgeons are practising every day all over the country as physicians, and the physicians of the community are every day practising surgery. But then Mr. Travers would say that "the work is never well done; and of course if his own views and positions be not altogether one mass of falsehood and fallacy, neither the "surgery" nor the "medicine,"—*the work*, as he elegantly expresses it,—is well done, because it is done by men of a "lower grade," which term cannot mean anything else, when applied to the profession, than men of a lower education, a lower capacity, a lower state of knowledge, a lower state of qualification to practise, than distinguishes fully qualified "surgeons" and "physicians,"—which latter, according to Mr. Travers, men cannot really be, without belonging to some imaginary "higher grade" of medical practitioners than is to be found anywhere, except in the ranks of hospital surgeons and Fellows of the College of Physicians.

375. "Would it be possible to define in what cases a surgeon might, and in what cases he might not administer medically

* As soon as it serves any of these witnesses' purpose to admit that surgeons in general practice are "well-educated men," they will allow them that title. On all other occasions they are men of "*a lower grade*." Mr. Guthrie called them the shoeblacks of medicine, or something lower and meaner still. The fact is, that just at this part of his evidence Mr. Travers wanted to create an impression that "surgeons" are also physicians, because the day of "pure surgery" is quite gone by, and the profits of it too.

to his patient?"—"He could not treat half-a-dozen cases unless medically: he had better *shut up shop* immediately."

376. "Then in case a person were qualified to practise both medicine and surgery, would you prevent his practising both if he thought proper so to do?"—"I would leave it to the good taste, gentlemanlike feeling, and habits of courtesy, of the members of the two professions, not to *tread upon each other's heels*." *

377. "What view do you take of the apprenticeship to apothecaries?"—"I object to its length, but consider that all persons who practise the details of pharmacy, whether medical men or druggists, should undergo examination before the Company of Apothecaries. As to the expense of medical education, it would be no disadvantage to the public if it were a little increased."—Mr. Travers wants to get some more money from the students. It is quite plain that the expense of medical education cannot be purposely increased excepting by making certificate or diploma fees higher. Let the profession bear this in mind, wherever they find a Councillor advocating an increase in the expense of medical education.

378. "What is now the expense of a general practitioner's education, if he studies in the London schools?"—"I never made the calculation accurately; but a great many *do it under* 200*l.*, including board and lodging, during a residence in London of sixteen or eighteen months. Perhaps I should say 250*l.*"

379. "In increasing the expense of medical education, have you considered that in every additional charge you impose upon a licensed practitioner, you are offering a new premium to the irregular man?" "I take it for granted that the Legislature could make such an enactment as would diminish in some measure irregular practice, though it will still be evaded: people will practise under false colours, and if a man *will* go into a pond, knowing that he shall be drowned, he *must be allowed to do so!* Yet there should be such means taken to prevent it as common police regulations adopt to prevent suicide."

380. "What has been the effect of the Anatomy Act?"—"It has put down body-snatching completely."

381. "Do you wish to add any other observations?"—"In reference to the Council of the College of Surgeons, I wish to say, that I do not think that any exception can justly be taken to the mode of electing the Council, though I think that some such regulation as a man's quitting the board of examiners at a certain age (say, for argument's sake, at the age of 70) should be adopted, and I would suggest that one member of the Court should retire every year, so that each man might, other things being the same, hold his seat for ten years."

382 "Would it not be still better, if one-third of the Court were to retire annually?"—"That I would leave for consideration."

383. "Does the examination of students at the College turn so much on practice as on principles? and if most on principles, will not a board composed of persons thirty-six years of age be fully competent to examine students?"—"I confess that for the junior examination they might be more eligible. Licentiate should be the title of the junior grade, and Fellow or Master that of the higher."—Two things should here be noticed,—first, the admission that junior examiners would be competent to examine students of such a class as those who are now examined at the College, a fact which has in all previous parts of the evidence of the Council been strenuously denied; and, secondly, that the witness proposes, under a new form of constitution, to establish precisely the same odious distinction of titles as now exists in the College of Physicians, and has met with overwhelming opposition from the so-styled 'lower grade' of that College,—the *licentiates*. Why, if the Parliament were so foolish as to act upon such a suggestion, a new reform would be demanded most strenuously before a month had passed under the new law.

384. "Provided a man gave up pharmacy, would he be admissible to any post of honour?"—"Exactly; a very material feature of the proposed plan is, that it offers to all its members an ascending scale; and no man who entered the profession, however *low in purse* or in *connexion*, though he should begin by *the most menial offices which the apothecary requires*, provided he could *meet the impediments that of course present themselves to every man*, and overcame them by perseverance, would be considered ineligible to go to the very top of the ladder, to be sergeant-surgeon or physician in ordinary to his Majesty; and I would only say further on the point of pharmacy, that I have deliberated much

* Three most chaste and becoming expressions are marked in italics in 374, 5, 6:—1. With regard to medicine and surgery, "the work is better done if men keep in their own places." 2. A man had "better shut up shop than practise surgery alone." 3. "The members of the two professions" (the *two* professions, by-the-by) should not "tread upon each other's heels." Pretty evidences of the intellectual breeding of a "higher-grade" surgeon!

upon it, and confess that it is a difficulty; but we must take the least of the difficulties that surround the subject. If there were a good understanding among the leading members of the profession, *we might hold out such an inducement to provincial hospital surgeons and gentlemen practising with repute* in various parts of the town and country,—*by offering to them a degree*, with the *exclusive* privilege of teaching in all the more advanced subjects of the profession, and the power of occupying, equally with *ourselves*, whatever posts of honour the profession has to offer, —as to make them think the sacrifice of pharmacy worth their while, and lead them to come for such a degree before the Colleges."

385. "What would be the expense of an adequate collection of preparations for teaching anatomy, physiology, and surgery in London?"—"If you gave a man two or three years, and he was attached to, or assisted at, the hospitals, he might make a collection sufficient for the purpose of teaching anatomy, for a sum not much exceeding *one hundred pounds*."—Sir Astley Cooper said *one thousand!* What varieties of statement we have had from Messrs. Guthrie, Cooper, Brodie, and Travers!

And here ends the present public exhibition of Mr. BENJAMIN TRAVERS, who began the exposure of himself by assuring the Committee (paragraph 350) that he had "every objection to *monopolies*,"—failed in his progress as a witness for the College Council, to offer the sacrifice of any one existing monopoly,—and concluded (paragraph 384) by proposing the institution of a "degree" which should confer on its possessors "the *exclusive* privilege of teaching in all the more advanced subjects of medical science,"—that degree being accessible to no one individual in the profession who should not consent to abandon the most profitable and the most essential branch of medical practice! Mr. TRAVERS may now sink into another ten years of that professional obscurity which has marked the latter existence of the "GREAT SURGICAL ECLIPSE," into which we were formerly compelled to plunge him, and from which circumstances have induced us, for one brief hour, unwillingly again to raise his unsightly carcass.

EVIDENCE OF SIR CHARLES BELL.

The evidence of Sir CHARLES BELL, who is in sentiment an independent man,—save with regard to a few trifling prejudices, which five minutes' conversation with any man of sense out of the bigoted circle of colleagues in which it is his fate to move, would assuredly dispel,—and a man of science,—will be read with interest and gratification. Sir Charles needs to be set right on two or three minor points, but the whole tenor of his evidence is such that we have not deemed it desirable to arrest the current of his opinions by more than two remarks of our own as we proceed with the abstract.

386. "Are you a member of the Council of the College of Surgeons, surgeon of the *Middlesex Hospital*, and professor of anatomy to the College of Surgeons?"—"I am."

387. "Do you approve of the present mode of choosing the members of the Council of the College?"—"Upon the whole, I by no means approve of it. Very great injustice has been done by that method of proceeding. It is much to be wished that the most eminent men should be elected; though I must confess that I have great difficulty in suggesting a mode of sifting the profession to find them. An examining body, to perform its duty efficiently, should consist of men so distinguished and of such acknowledged merit, that they shall force respect from those who come before them as candidates. It would give more satisfaction were the selection the act of the whole body; you would then have more eminent men; at the same time, I do not mean any disrespect to the present examiners. I have heard the examination of my excellent friends before this Committee; and I must say, upon the whole, that they advise a plan *full of difficulties*, and I think that the legislature should proceed upon something more liberal. Our profession is not like some others. The science on which it is founded is progressive; and if you can secure a respectable education, and a tolerable proof of diligence, it is all that you can accomplish by examinations and degrees. Men of our profession have a field before them, and the only true and just eminence in the profession is, what a man may have done for its improvement. Distinctions must result from the successful cultivation of our art. I certainly would not exclude any practitioners, as a class, from belonging to the Council."

388. Whom would you make the electors of the Council?"—"A large body should be the electors. Without that, there is no honour accruing to the elected; but I must confess to the Committee that it is a subject I have not thought of deliberately. In the supposition of two grades being formed, I believe a very large portion of young gentlemen would prefer the higher, and that it would be a numerous body,—sufficiently numerous to answer the purposes of election; but with regard to the institution of two such grades in the profession, I confess to the Committee that though I formerly yielded to the reasons urged by my friends, principally Mr. Brodie and Mr. Travers, yet when I was called here, I turned it in my mind, *and saw great difficulties and many disadvantages from the plan of a higher and a lower grade.*"

389. "What difficulties and disadvantages did you see?"—"One certainly would accrue: that though men of some fortune would educate their sons for this higher grade, yet presently we should see that the men who *struggle* to obtain an education, and who by that very difficulty attain *strength of character*, would ere long prove themselves to be *the heads of the profession*. We do not find, as a matter of fact, that the young gentlemen who enter the study of our profession with *every advantage of fortune*, are those who make *most progress* in the long run."

390. "Do you mean that it is the man *qui zonam perdidit*, or rather he who never had one to lose, that usually distinguishes himself the most in your profession?"—"I believe that there is something in the necessity for early exertion which gives vigour of intellect."

391. "From what you have last stated, is the Committee to infer that you deem it necessary that the electors of the Council, and those who are eligible into it, should be no other than the whole body of the members of the College?"—"On the supposition which has been stated, of a large and respectable body of electors, I can see no danger in electing from the general body. Those elected by such a body must have some distinguishing qualifications."

392. "What education should be required of those who are to receive the diploma of the College?"—"I have maintained in the Council of the College, that they should not fritter away the examination by putting questions on too many subjects. I would ask, what does a young man, retiring from his studies, and solely depending upon himself in practice, feel the greatest difficulty in supplying? It is the knowledge of anatomy. In expressing my opinion on this subject, I should very much wish the Committee to make a distinction, in planning any course of education, between the *lectures* which require demonstration, and those which are *mere discourses*; and which when fairly written out by a short-hand writer, would form but *a bad book*. Anatomy and chemistry require demonstration. They are therefore the most essential sciences to be taught by *lecture*, in all colleges of medical instruction. The practice of medicine and surgery requires to be taught by the bed-side of the patient. But without saying that elementary courses on medicine and surgery are useless, *yet they are those which may be supplied by diligent reading.* To crowd the curriculum with a variety of subjects, would be little conducive, I think, to the end this Committee has in view. The education to be insisted upon, and the examinations to be undergone, should be limited as much as possible to the really essential branches of medical education."

393. "State more fully what you consider those essentials to be; and how they ought to be taught?"—"The College of Surgeons has hitherto maintained its character by the chief men being anatomists. Its reputation is at this moment owing in a great measure to the just eminence of such men as Cline, Abernethy, and Cooper; and therefore I have advised them in Council, to take care to maintain this character, by not admitting any candidate to come before their examiners without a perfect knowledge of anatomy and its applications. Will the Committee permit me to say, that there is a disposition to diminish the importance of anatomy; to consider it as a subject which may be taught distinct from pathology and surgery. Now, I believe anatomy to be the groundwork of all; as being that demonstration from which, by process of deduction, not only the elements, but the great rules of the profession are to be drawn. I mean that the teaching of physiology, as well as of the practice of surgery, cannot be separated from anatomy, without becoming diffuse, verbose, and of little use. I should in such a course of lectures, include morbid anatomy; for pathology can never be better illustrated than when you have the different parts before you, and are speaking of their functions. Such has been the practice of our best teachers here, as well as of the Monros in Edinburgh. *I do not think that there has been any advantage from multiplying professorships, and dividing and subdividing the subjects of lecture.* I fear it has often been done *for the purpose of providing for individuals.* Surgery and medicine

may be better taught by bed-side attendance, at the hospital, than by lectures. With respect to anatomy and surgery, I think the College would have acted wisely in insisting on the schools of anatomy being adjoining to great hospitals; and have acted, too, somewhat weakly in being afraid to insist upon it. They have appeared to me anxious to gratify or satisfy the public press; and have been timid under its lash: but the principle is a good one. For the teaching of anatomy and surgery, even in their elements, and certainly in their principles, must be combined with hospital practice; and either of these, separated from the other, I would say, avails little; nay, is dangerous. This question leads me to consider the difference of teaching in the country and in London. For a man to lecture from the 1st of October to the middle of May, to ten or fifteen pupils, I conceive to be a thing utterly impracticable: and therefore, where there are no pupils to influence, and no large class to be drawn together, it is not reasonable to expect that the lecturer will be fully devoted to his subject; and this is a reason why I conceive that teaching will never be well carried on, unless under circumstances where the professor, by his attention and abilities, can hope to form a large class; which, in the end, gives him emolument, influence, and honour. It is in this light that we perceive the advantages of the metropolis. To study partly in the metropolis, is essential to a good education; but at the same time a previous education in a country hospital must be highly advantageous. How far however it would be becoming to make a part of the period of study to be spent in the metropolis *imperative*, I conceive to be a different question. With regard to elementary education, I should commence, naturally, with some branches of philosophy; and for this reason: that as a teacher I have had opportunities of observing that young men, after being apprentices of five years, are still incapable of following a demonstration, or a deduction, of any kind. They are not habituated to *study*; and you must almost educate them to that first of all. There is the greatest difference in the application of young men in the second year, compared with the first; which I attribute to their minds never having been brought to bear continuously upon any subject. With regard to the age for applying to medical studies, the ages of 19, 20, and 21, ought to be solely devoted to them. The branches of knowledge that might be deemed essential, as preparatory to professional study, are classical studies, in the first instance, to a moderate degree; natural philosophy; and, introductory to that, mathematics. A popular view of it would be quite sufficient."

394. "Would two boards or one board be the fittest, in point of number, to examine candidates for general practice?"—"I see no necessity for more than a single board."

395. "May the repugnance of the Council to examine on midwifery arise from their consciousness, that as they refuse to admit into their body practitioners in that department, the public would regard them as unfit to examine upon it?"—"There is a certain *illiberality* in all that, in *making those distinctions*, and were this a becoming occasion, I think I could show this Committee that the greatest danger in practice results from a surgeon conceiving that he ought to know nothing about midwifery."

396. "We shall be happy to hear your opinion fully expressed?"—"I must give instances within my own experience. We shall suppose a surgeon treating a stricture of the rectum, a very common disease. Now I have known, on more than two or three occasions, that a surgeon has been treating a supposed stricture of the rectum, for years, by painful operations, when the complaint arose from displacement of the womb, as he ought to have known. A surgeon is called to perform an operation upon a tumour of the belly, an ovarian disease, it may be. Now such a thing may happen as a mistake in regard to that tumour of the belly, by confounding a tumour of other parts with disease of the womb; or disease of the womb with natural pregnancy. Then in the case of cæsarean section of the womb, who is to decide on the propriety of the operation, and who is to perform it? I was called into consultation about performing the operation of puncturing a tumour in the pelvis of a woman, which tumour prevented the descent or delivery of the child; there were four practitioners in midwifery present. When I went to examine the woman, I said, 'I feel no tumour.' On which one very influential person indeed, whom I greatly esteem, said, 'Not a tumour? Why it is as large as a Norfolk dumpling.' On which I put the question, 'Are you aware that the spine is distorted, and that it is the distorted spine that you feel, and not a tumour?' In those circumstances, then, if I had not known the effect of a distortion of the spine upon the pelvis of a woman, I should have been persuaded to run my instrument into that supposed tumour. But not to multiply examples, or detain the Committee with these cases which are so strictly professional, I would say, that one of the most common opera-

tions of surgery in our great hospitals, is the amputation of the breast; and this cannot be safely done unless the man has paid very particular attention to what is now denominated the department of midwifery; in short, it is a part of surgery."

397. "What are the broad distinctions that you would have made in the medical profession, if no regard were to be had for the preservation of existing interests?"—"I think that we ought to pay due respect to public opinion on that subject, and I know no other distinctions than those of the physician, the surgeon, and the apothecary."*

398. "Is there any such marked distinction between the practice of the physician and the surgeon, as the names would import?"—"Most of us must take it as the stream flows. The public does form strange opinions and inferences, and they will make a doctor out of a surgeon, in spite of all distinctions and designations."†

399. "Is not a large share of the practice of most of our eminent surgeons in reality medical?"—"If an ignorant person, whether in the lowest or the highest rank of society, conceives that an individual is intimately acquainted with the structure of his body, he will take that man as his consulting physician, whether he be a physician or surgeon. I conceive that the legislature are under obligation to society to give designations to professional men."—Very good. Then as all practitioners will be consulted as *physicians*, the title of "Doctor" is the title which all licensed men (none being licensed to practise but competent men) should possess by virtue of law.

400. "How far is it in the power of the legislature to put down irregular practice?"—"It is impossible to influence the free public mind in this country. Could there, for instance, be anything more like a demonstration of the incompetence and dangerous practice of a quack, than we have had of late years? and yet I have this morning seen a young gentleman of condition in society, with his back as black as my boot, from friction by the same quack. It would be difficult, indeed, to curb or direct the public mind in this matter."

401. "Would any good arise from the institution of an examination and a diploma for druggists?"—"The objection I can see to this is, that you make doctors of them. For if you have a man who has attended certain classes, and obtained certain certificates, then he is to all intents *a doctor*; and then he does not sell his drugs, but his information, his opinions. He is no longer like a grocer, selling certain materials at the lowest price, but he sells them accompanied with his opinion; which opinion must be paid for."

402. "But does he not now practise in that way, though you require of him no education, and confer upon him no diploma?"—"I should think that, in point of practice, the apothecary would beat him out of the field, but if he has practice without a diploma, the granting one would tend to increase it; and would, in fact, make an apothecary of him. If the point were merely that he should know the articles he deals in, what is poison, and what is harmless, such an inferior examination as that might be highly useful, at the same time giving him no authority, even in his own conceit, to prescribe those articles."

403. "Ought the legislature to prescribe the same course of study and of examination every where as a qualification for the same professional title?"—"Certainly."

404. "If the same course of study and examinations were required as a qualification for the same medical title throughout the United Kingdom, ought not such a title to invest its owners with equal privileges in every part of the kingdom?"—"I think it must be so. A surgeon of London should be entitled to practise in Scotland or Ireland, and *vice versa*. The very principles of the union of the three kingdoms require it."

405. "Would you recommend a new general Board under anticipated changes?"—"I would say undoubtedly, that it is practicable to form a better Board than any existing at present."

406. "Of late years, has the professional knowledge of the general practitioners in England been materially improved?"—"I would say, that it is more extended, rather than that the individual acquirements are much increased. There is a greater number of competent and well-educated men; but, at the same time, taking it in another sense, I cannot look back to the great authorities of our profession and say that we are better than we have been."

407. "The higher you raise the cost of medical education, the greater advantage do you not give to the irregular practitioners?"—"It must be so. There is a

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* Our anecdote of the member for the Tower Hamlets last year, will be vividly brought to mind on perusing this reply. It was good enough to reprint, but we refrain.

† But we should not make the ignorance and the strange opinions of the public the rule of legislation in a matter of science.

mode of making it cheaper to the pupil, and yet maintaining the respectability of the profession; that is, by securing situations in the profession, to attain which a man shall willingly struggle during life: situations to be bestowed in reward of meritorious and long services. If there be no such high stations, there can be no respectability in the professors of medicine I hope the Committee will not consider me too bold if I aver that society generally, and even our own profession, pay too much consideration to those who enrich themselves by practice; and too little to such as have devoted their time and energies to the science of their profession. Young men are not brought into the profession as heretofore, desirous of attaining the condition of a Hunter or a Munro; but their attention is directed to men whose eminence is in their riches. Generally speaking, for instance, examiners should not be those whose practice was the greatest; but men who have shown by the improvements they had made in anatomy and surgery, that they were best qualified to examine on the principles of the profession. But that subject, to be thoroughly discussed, would require you to consider what sort of life a man leads who is in high practice in London, and to inquire if his incessant attention to the lucrative part of practice favours the condition of mind which is best suited to improve the profession; or to raise himself to a just eminence."

408. "Ought examiners to be chosen partly from among juniors?"—"I should be at a loss to conceive how the juniors should deserve the eminence. If you take young men who merely give promise of distinction, I am afraid it would open a door to intrigue. For who is there that has a son or a nephew, but will express his expectations of his some day attaining eminence?"

409. "But if younger men might be found, *fully competent to examine*, and too happy to be so employed at some moderate salary, why not appoint them to that office? and if situations of honour and emolument are required for those to aspire to who devote themselves to the science of the profession, why not let the savings in the examiners' board be applied to endow professorships, as objects of their ambition?"—"As to the latter suggestion I am sorry to say, that *when I have made a proposal in the Council which tended that way, it has met with the most marked discouragement*, the prevailing sentiment being that they were not a college of instruction."

410. "Ought medical examinations to be public to the profession?"—"From all that I have known of examinations it is most essential that there should be something like an impression that you are before a public body, and that too as much with respect to the question that is to be asked as to the answer which is to be given; that, in short, the examiners should be under examination, as well as the pupil."

411. "Would it be desirable, in your opinion, that there should be a board appointed in London to confer medical degrees, with power to grant the license to practise; or should there be two distinct bodies, having these separate duties entrusted to them?"—"These are so nearly allied, that *I do not see a good reason for having* DISTINCT *boards for bestowing these privileges*."

412. "Is there any other observation that you wish to make?"—"I think that the Committee have so fully searched all my opinions upon the subject, that I cannot state anything in addition."

DR. JOHNSON'S REPLY TO ERINENSIS.

To the Editor of THE LANCET.

SIR,—My reply to ERINENSIS will be different from his letter. It will be short and void of abuse, or even of asperity. ERINENSIS charges me with "breaking through a solemn truce." I deny the existence of any truce between us. I never had any communication, direct or indirect, with him, in my life, and I have no more knowledge of him, personally, than of any inhabitant of the Georgium Sidus. But even if I had broken a truce, ERINENSIS does not observe the usual formalities and humanities prescribed by civilized nations. When a treaty is infringed, the aggrieved party demands an explanation or reparation; and, if these are refused, he then has recourse to the *ultima ratio regum*. Not so ERINENSIS. He takes offence at an expression, *not meant to offend*, and, without asking or waiting for an apology, he rushes on his adversary, or, indeed, by his own account, his *friend*, at the head of seven mortal columns, each as close and compact as a Macedonian phalanx. And what is the cause alleged for this dreadful foray? It very much resembles that which the wolf alleged for his *onslaught* on the lamb—the crime of drinking at the same stream—though, in this case, the distance between the imbibers rendered it very improbable that the fountain should be made turbid by either party.

Having observed a curious case of a catalepsy in a respectable contemporary,

I quoted it in the journal which I conduct; but while correcting the press, I noticed a rather angry denial of its authenticity by ERINENSIS. I had only time to add a short note, without any of those *italics* which ERINENSIS has unjustifiably scattered in it, stating the fact of its being impugned, but declining to suppress the case, "unless its authenticity be denied by more than anonymous testimony." This very sentence shows that I was not then aware of any *other* testimony being in existence. And I solemnly protest, upon my honour and soul, that I have never seen, before or since the writing of that note, a single line of Mr. Ellis's report of the case in question. If I had seen it I should have immediately noticed it, for what concern have I with quarrels between ERINENSIS and the Editors of the *Dublin Journal*? If ERINENSIS will point out the Number of THE LANCET where it is inserted, I shall cheerfully quote the paper, my object and interest being the selection of facts and not of fictions. ERINENSIS has, therefore, in my humble opinion, been much too exasperated by so trifling an affair. *Le jeu ne vaut pas la chandelle!* As for going to war upon such an occasion, it is quite foreign to my peaceable habits in these piping times. It would be all very well at Donnybrook fair, where the lively countrymen of ERINENSIS—

> "Meet with their friends and for *love* knock them down!"

But it is now so long since I exercised the sprig of shillelah, that I am far more inclined to have my "heart soft with whiskey" than my "head soft with blows" from the cudgel of ERINENSIS. He concludes his philippic with "hopes that we may still be friends," and I can assure him that we shall not be *enemies*, for if he carries on the war after this, he shall have the whole field to himself. Having been more than twenty years on half-pay, I am too old, and I hope too wise, to volunteer for active service. I have seen much more of the "horrida bella" than ERINENSIS, and if he is determined, as his motto declares, that—"erunt etiam altera bella."—he must select more youthful antagonists, or go on a crusade against windmills. If my juvenile friend's organs of *combativeness* have experienced any sudden development, he ought to expend his pugnacity on those who are adverse to the cause which he advocates.

ERINENSIS has employed a good deal of casuistry to prove that *anonymous* communications are not inferior, but rather superior to authenticated documents. The notices to correspondents in the very Number of THE LANCET in which the letter of ERINENSIS appears, would seem to indicate a very different opinion on the part of its Editor. In *reasoning* upon facts, the *anonymous* writer has quite as good grounds as, and even some superiority over, the authenticated author; but where the *facts themselves* are to be supported merely by *assertion*, then it so happens that the world attaches more importance to the nominal than to the pseudonymous authority. There is, however, one advantage which the anonymous author has over his antagonist, and which is well known to, though never mentioned by, ERINENSIS—the safety of using language in controversy, which he would not think of employing were he not protected by the mask. This consideration ought to induce every generous and magnanimous mind to keep within the boundary of moderation, and to say nothing, under the anonymous shield of irresponsibility, which he would not proclaim in open day.

I am, Sir, your obedient servant,

JAMES JOHNSON.

July 18, 1835.

CAUTION TO SURGEONS.

"AN impostor is travelling the country who feigns the symptoms of strangulated hernia. He is able to imitate hiccup, and actually vomits. The large tumour on the right side, on accurate diagnosis, will be found to be a hæmatocele, which he dexterously pushes up to the inguinal ring, pretending to suffer the most exquisite pain on its being handled, evidently for the purpose of preventing the medical man from making a perfect examination. He has a small hernia on the left side, which does not descend into the scrotum. This will be found to be easily reducible. He professes to entertain the greatest anxiety to be forwarded toward some distant infirmary, and for that purpose obtains money and the means of conveyance from charitable people, and sometimes from the parish officers, who are glad to get rid of him to save his becoming chargeable. His practice is to feign the symptoms of *strangulated* rupture, directing attention to the tumour formed by the hæmatocele, and he manages to fall ill in some spot where he is likely to be observed. He is fully master of the nature, symptoms, and prospect of operation in his simulated complaint. He speaks well, and writes begging-letters; he is stout, square-built, medium height, of a fair complexion, and light-brown hair, and has the marks of many venesections in each arm. He has called himself Pearce,

and has professed himself to be a sculptor. The deception he practises is so complete, that few will be able to detect it, unless they are forewarned. He is now, it is suspected, pursuing his tour in the southern counties, this being his second visit into Dorsetshire within about a twelvemonth. This statement is made on the authority of Mr. E. Spooner, surgeon, of Blandford, who discovered the impostor last week at Spetisbury, and traced him to Poole."

To the Editor of THE LANCET.

SIR,—Having met with the above "Caution to Surgeons" in the *Salisbury and Winchester Journal*, and thinking that all possible publicity should be given to it, particularly among medical gentlemen, I hope it will be inserted in THE LANCET, from which probably it may be copied into other periodicals.

A man answering in many respects to the above description, and calling himself "Pearce, a sculptor," was visited by me at a country inn in the autumn of 1833, when I found him apparently in great pain, and labouring under every symptom of strangulated hernia, even to the vomiting of feces. On entering the bed-room of my patient, immediately after the occurrence of the symptoms (early in the afternoon), he was in the act of vomiting into a vessel containing feculent matter, mingled with other matters, from the stomach, more or less in a fluid state, and on my questioning him as to whether *all* that I saw had been discharged from the stomach, he answered most distinctly and unequivocally in the affirmative; nor, indeed, could I have entertained at the time the slightest suspicion to the contrary.

The tumour on the right side, it would appear, was moveable when Mr. E. Spooner saw it, which the man "dexterously pushes up to the inguinal ring." Now I found the tumour extending from the lower abdominal ring to the bottom of the scrotum, and altogether immoveable. There was a hernia in the left inguin, which I instantly reduced.

The patient attributed the supposed strangulation on the right side to the circumstance of overreaching himself, while in the act of plucking a bunch of nuts from the topmost bough of a hedge-nut bush, during which, he said, his foot slipped, and he fell into a ditch.

The usual means were resorted to by myself and assistant, in order to reduce the supposed incarcerated hernia without effect. The necessity of performing the customary surgical operation was, in a few hours, earnestly insisted upon, and as earnestly objected to by our hero, who desired only the means of transporting himself into his father's presence, before whom alone he would undergo the operation; for he said he had offended his sire, and would be reconciled to him without delay, or die in the attempt; he would write to his father appointing a place at which they might meet on the road, adding that his parent was a respectable brewer at some place, the name of which I have forgotten, and that every farthing lent to him, with all expenses, would be most readily and thankfully returned. Alas! however, the moment my back was turned upon him, and he had touched the "siller"—three sovereigns—the "canny rogue" bolted from the inn, pursued his journey in some covered cart (which, at the moment, appeared at the inn-door), leaving his generous benefactors on the sharp point of a dilemma, and to this day has not availed himself of an opportunity to obtain the honour and gratification of returning the *sovereign* remedies employed for his relief. I enclose you my name and address, and remain, Sir, your obedient servant,

CHIRURGUS.

July 15, 1835.

BRITISH ASSOCIATION

FOR THE ADVANCEMENT OF SCIENCE.

THE fifth meeting of this Association will take place in Dublin, during the week commencing on Monday, the 10th of August, 1835.

President Elect:—Rev. BARTHOLOMEW LLOYD, D.D., M.R.I.A., Provost of Trinity College, Dublin.

Vice-Presidents Elect:—Lord OXMANTOWN, F.A.S., M.R.I.A.; Rev. WILLIAM WHEWELL, F.T.C.C., F.R.S., &c.

Secretaries:—WILLIAM R. HAMILTON, M.R.I.A., &c., Astronomer Royal of Ireland; Rev. HUMPHREY LLOYD, F.T.C.D., M.R.I.A.

Treasurer:—THOMAS H. ORPEN, M.D., M.R.I.A.

The Association is divided into six Sections, which will meet daily during the week, between the hours of 11 a.m. and 3 p.m., at the following places:—Section A, Mathematics and General Physics.—Philosophy School, Trinity College. Section B, Chemistry and Mineralogy.—Chemical School, Trinity College. Section C, Geology and Geography.—Theatre, Royal Dublin Society. Section D, Zoology and Botany.—Board Room, Royal Dublin Society. Section E,

Anatomy and Medicine.—Council Room, Royal Irish Academy. Section F, Statistics.—Divinity School, Trinity College.

Members who may have any papers, or other communications to lay before the Association, are requested to state, before the end of July, their general nature and probable extent, in letters addressed as follows:—*To the Secretary of the ——— Section, Royal Irish Academy, Dublin.*

Unless this precaution be attended to, great inconvenience must arise, and valuable papers may be unavoidably rejected in the press of business. Investigations of any considerable length may be most advantageously presented *in abstract*.

The general meetings of the Association will be held in the rooms of the Rotunda, on four evenings during the week, at eight p.m. The two remaining evenings it is proposed to devote exclusively to the promotion of personal intercourse among the members. A limited number of ladies' tickets, for the evening meetings, will be distributed according to the rules defined by the Local Council.

Ordinaries will be provided for the accommodation of the members in convenient situations, and plans of the tables will be exposed in the place of general rendezvous each morning, so as to enable members to select their places. Lists of lodgings will be likewise prepared, and exhibited in the same place.

Further information will be given at the Examination Hall of Trinity College, at which place there will be an attendance of proper persons for that purpose, during the week of the meeting and the preceding week. Tickets of admission will be issued in the same room, and it will also be the place of general rendezvous.

The rules of admission are the following:—Fellows and members of chartered literary and scientific societies, publishing transactions, are *entitled* to become members of the Association, on subscribing an obligation to conform to its rules, and paying their subscription. Office bearers, members of councils, or managing committees of philosophical institutions, and other members recommended by such councils, are entitled in like manner to become members of the Association. Persons not so qualified may be *elected* members of the Association, if duly recommended and approved of by the Central Council. The annual subscription is one pound, to be paid in advance upon admission. The composition, or life subscription, is five pounds.

THE LANCET.

London, Saturday, July 25, 1835.

We publish at page 543 the circular issued by the *British Association*, with respect to the meeting to take place in Dublin in August. Upon the great advantages which may be expected to accrue to science from this Association we need not dwell, the subject being one about which all are agreed. In its constitution, every observer of passing events must perceive both the power and the practicability of uniting into one great community, and for the advancement of one great object,—the diffusion of science,—the discordant elements of professional societies and institutions which heretofore had unfortunately acted on quite a different principle. To what extent such an association may influence the destiny of any country in which it is placed, is a speculation only bounded by our ignorance of the degree of unanimity and co-operation which may hereafter animate their labours. Kings, and Princes, and Legislators may enact their laws and ordinances; but in the hands of the members of such an Association, comprizing as it does the whole learning and intellect of the country, a power beyond all others in commanding the will and forming the character of their fellow-men, undoubtedly resides. Upon unity of purpose, harmony of co-operation, and untiring perseverance among its members, must depend the effectuation of those splendid results which are most certainly within the reach of their attainment. Every member of it should consequently keep these objects and principles in view; and consider himself personally bound to advance them by every means in his power. It is true that such an Association, even keeping such rules in view, cannot supply the place of individual

talent and exertion; but a compliance with these duties cannot fail of having the effect of exciting, facilitating, and rendering more agreeable, the labours of genius and application. Hence the necessity of attendance at the meetings of the Institution; which from all we can learn of the intention of many of its most distinguished members, as well as from what we know of the local inducements and arrangements made for the accommodation of the Association, promises to be unusually great this season in Dublin.

Knowing all these circumstances, and being aware more particularly of the deep interest which the scientific men in Dublin, as well as its inhabitants generally, take in the present visit of the Association, we deem it our duty to advert to a circumstance connected with this subject, which might be interpreted in a more serious sense than it really deserves without an explanation. In the Circular which we publish, it must at once be perceived by the reader, that the name of the *Dublin College of Surgeons* does not appear. To any one acquainted with the pretensions only of that body—with its affectation of superiority over similar Institutions,—this omission of its very name, on an occasion of this kind, would appear unintelligible. In such a matter, however, there is nothing extraordinary. The omission is precisely as it ought to be. It is now well known, that what was once the Irish College of Surgeons, no longer has an existence; it is now composed and conducted by a handful of persons who have established themselves in the possession of the College in the same way that, as we are told by naturalists, the fox dispossesses other animals of their abodes, that is by his intolerable abominations and filth. Jacob and Harrison, and the rest of the "tail," are now, we may say, the sole occupants of the den in York Street. Their habits and mode of conducting themselves on all occasions, were found to be totally incompatible with the attendance or interference of the respectable resident members of the College in Dublin. All this, it would appear, was well known to the Council of the British Association; for, on being invited some time ago to hold the meetings of one of their sections in York Street, they declined the intended honour, on the ground (a complimentary one, no doubt) that the Dublin College of Surgeons (meaning the school and professors of course) was unknown as a scientific body, having neither produced men nor works which advanced the interests or extended the boundaries of human knowledge!

We need not confirm by specifications the justice of this opinion; it is too true in every respect, and it is certainly pleasant to have the pompous pretensions of the usurping junto in York Street reduced to their proper dimensions by the unobjectionable and impartial estimate of such a body as the *British Association*. Notwithstanding this gentle rebuke, the "junto" would have it that they were fit society for scientific men; and actually held another meeting on Thursday week for the purpose of entrapping the British Association into their company. The project proposed was to invite the Association, while sitting in Dublin, to a social and intellectual banquet, to be provided out of the funds of the College, and the hashed-up remains of the papers of the Surgical Society, of which the College "junto" now forms the principal moiety.

This movement was made for two reasons,—first, lest the party in question should suffer in their fancied local importance by the slight offered to them by the *British Association*; and, secondly, for the purpose of endeavouring to secure a little *eclat* from the mere circumstance of entertaining the Association, and reading papers before them. Of the two evils they would prefer making themselves ridi-

culous before the Association, to appearing contemptible in the eyes of their fellow-citizens. The indulgence of their vanity and presumption would amply compensate them for the failure of the attempt to be successful; they would be perfectly satisfied, if they only attained to the distinction of defeat. Their objects were so well known to the respectable members of the College, that but few attended; and of these few some considered it their duty to object to the scheme of the *British Association* being made the dupes of this designing and contemptible faction. It was stated that the persons who brought forward the motion, acted with bad faith towards the general body, inasmuch as they deferred any notice of it to the latest moment, while they were all the time preparing papers for the edification of the Association;—that such an invitation in the name of the College generally would have the necessary effect of making the whole body responsible for the character of papers which it was well known would be unworthy of the College to produce, and of the Association to listen to;—and that the Charter of the College did not admit of money being expended for any such purposes as those contemplated in the present motion. Notwithstanding the truth and reasonableness of these objections, the motion was carried by some fifteen or twenty persons in attendance for that purpose, and the Association is on the strength of this scheme of a fraction of the College, to be invited to sip champagne at the expense of perhaps upwards of a hundred guineas to the College; and to sit out the rant and declamation of the *quondam* professor of syntax and elocution, Mr. EVANSON! The Association, the most learned and respectable perhaps in the world, will, we have no doubt, duly appreciate the motives of the entertainers, and rate at its proper value a rehearsal of the vapid contents of the burrow of the half-extinct Surgical Society of Ireland.

On the business of a personal nature which occurred at the last two meetings, we shall take an early opportunity to make a few remarks. The state of the institution upon which we have been for some time commenting, has at length assumed an aspect which, if not averted by the timely interference of the respectable members resident in Dublin, must terminate in the total disorganization of that institution.

INTERCEPTED LETTERS.

"TO DR. GORDON.

"SIR,—The President of the Royal College of Physicians, after giving your repeated applications to be admitted to the Fellowship every consideration in their power, have directed me to inform you that they have unanimously agreed not to admit you into their body.

"In fulfilling this important duty I think it proper to inform you that the President and Fellows have come to that resolution from several reasons, but particularly in consequence of the immoral tendency of your evidence before the Drinking Committee of the House of Commons, wherein you have recommended London beer to the community as a wholesome beverage. I have the honour to be, Sir, your obedient servant,

"———, M.D., Sec.

"Pall Mall East, July 10, 1835."

"DEAR SIR HENRY,—It is not for me to attempt to express my agony and surprise on receiving a letter from the Secretary of your College, which I of course consider as official, dated July the 10th. It *distresses* me, because to become a Fellow has indeed long been the object nearest my heart; and it *surprises* me, because from the promises you have so often made to me, and which I was not aware were your *conditional* ones, I had no doubt of your complying with my wish. You have, therefore, I conceive, done me an irreparable injury. If you really never intended to promote me, why did you let me cherish the hope of such an honour, and allow me to talk about it to my friends, and talk of it yourself? When you again and again honoured me with

your company in Finsbury-square, I gave you the most sumptuous and expensive entertainments, I invited none but stanch conservatives to meet you, and I put an account of all the dinners into the newspapers, with your name conspicuously prominent in every individual paragraph. I also never failed to take every opportunity of calling you in to all those of my patients whom I could persuade to have a *consultation*, impressing on them a sense of the superior professional acquirements of *Fellows*, and especially their high moral character. Therefore figure to yourself, Sir Henry, my position *now*. I do hope, indeed, that you will pity me and revise my case, for I cannot laugh at the Fellowship as in days of old. I am therefore humbled *lower than ever* if you are obdurate. I cannot speak even of the *morality* of the profession, since you tell me that my evidence before the Drunken Committee was not only immoral in its tendency, from the *recommendation* of beer as a wholesome beverage, but exceedingly selfish from my urging the use of *London* beer only, my worthy father-in-law being a metropolitan brewer, though if the insinuation originated with any one but yourself, I should treat it with all the contempt it merits. In the firm hope therefore that you will again, and at no distant period, bring this painful case before the College, be assured of my devotion, and that no endeavour shall ever be wanting on my part to support the dignity of the College, and stem the current of reform in your ancient, venerable, and inestimable institution. I have the honour to be, dear Sir Henry, your faithful and obedient servant,

"W. G.

"Finsbury-square, Tuesday."

The following report has been extracted by a correspondent from some "Mirror of Parliament," and forwarded to us for republication. It is, as a medical farce should be, not a little "humorous."

MR. BRANSBY COOPER'S EVIDENCE BEFORE THE HOUSE OF COMMONS, IN MR. O'MALLEY'S CASE.

The SPEAKER.—Do you consider the air of Newgate very salubrious?—Not for my friend O'Malley.

Is he an old friend?—Very, I saw him yesterday for the first time.

Did you find him sick?—Decidedly sick—of being shut up.

Mr. ORD.—Did you prescribe for him?—Yes, fresh air as an alterative.

Did he take the medicine?—No, the Governor of Newgate would not let it be made up.

A MEMBER.—What is his complaint?—That they won't let him out.

Did you use the *lancet*?—No; but he offered to *bleed* freely if he was set at liberty.

Did he speak of his body being confined?—He did.

What medicine would best suit his case?—A little *opening* medicine, certainly.

How should you describe his disease?—As a sort of a—kind of a "can't-get-out"-ishness,—a disease which Dr. Sterne has observed in all caged birds.

Lord JOHN RUSSELL.—Why is Newgate air worse than the west-end?—Because it is much more *confined*.

How happens it that a prison is so injurious in Mr. O'Malley's case?—Because he has been a *free* liver, my Lord.

Is confinement generally hurtful?—It impedes the action of the muscles, my Lord.

Mr. JACKSON.—Are his spirits good?—"Spirits" are expressly forbidden in Newgate.

Has the air of Newgate ever proved fatal?—Persons *drop* off there soon after their arrival.

Are diseases particularly catching in Newgate?—Some are very Ketching.

Mr. SPEAKER.—You may withdraw, Sir. Your evidence does you vast credit; we are much obliged to you.

The reporter might have added that the evidence of Mr. Cooper not being quite conclusive, Dr. FARRE appeared at the Bar and assured the House that Mr. O'Malley was in so dangerous a state, that if he were not "let out" he would probably die,—laying claim to a knowledge of Mr. O'Malley's constitution on the ground that he had "once attended him for *idiopathic iritis!*" The house complied with these importunities, and Mr. O'Malley shortly after appeared at the Bar apparently in the best health.

SUCCESSFUL OPERATIONS FOR SUBCLAVIAN ANEURYSM.

To the Editor of THE LANCET.

SIR,—Amongst the remarks of cases from *St. Bartholomew's Hospital* which appeared in THE LANCET of July 11th, it is stated that Mr. Earle, having called the attention of his pupils to a preparation which had been taken from a patient on whom he had successfully operated for subclavian aneurysm five years ago, remarked, "that this was the only successful case which had occurred in London at the

time he operated, and he was not aware that any such had been subsequently attempted."

In the second volume of Sir Astley Cooper's lectures published in 1825 (Tyrrell's Piracy from THE LANCET.—ED. L.) which would be five years before Mr. Earle's operation, a case in which Mr. Key operated successfully, is related.

Mr. Green also has twice operated with success at *St. Thomas's Hospital*; the first case occurred eight or nine years ago, the second during the last summer.

I am, sir, yours obediently,

QUIDAM.

July 17, 1835.

N.B. I do not intend to say that the three cases above mentioned are the only successful cases which have occurred.

LETTER FROM THE NORTH.

To the Editor of THE LANCET.

SIR,—One of the amputations mentioned in my letter dated June 28th, has since died, and in the same wards a case of compound fracture of the leg has also been put an end to. In the latter case the bones were *not kept together*, but allowed to dance up and down; the irritation thus produced soon brought on delirium tremens, which carried the patient off before some *silver wire* could be procured to *tie the bones together*.

A boy had diseased neck and shaft of the humerus, and I believe the disease also involved the glenoid cavity. The practice pursued was excision of the neck of the bone, the shaft being left to exfoliate, and the glenoid cavity to shift for itself.

In spite of all that some surgeons have written on the advantages of flap amputation, it seems that they cannot profit by their own writings. In these wards there are two amputation cases, in both of which the bone protrudes from between the flaps, but of course the flaps are not to blame; it is owing to "acute necrosis!" Yet why in one case (that of a girl) dissect the integument where it adhered to the bone high up, and try to pull it over the protruding part? If "acute necrosis" were going on, why make so many unsuccessful attempts to pull away the protruding part? Or, is it from motives of economy that it is left out, to save the patients the expense of artificial limbs? How the stumps in other wards contrast with these stumps—no bones protruding there—no "acute necrosis" going on there—no screams heard at the daily dressings—*alias* torturings!

I see in a late "report" that a surgeon here calls his opposition hospital a "Maison de *Sante*," which is really a good joke, and not Joe Miller's. If entitled "La Maison a Fourgous Chauds," the name would indicate the practice.

Mr. Fergusson's lithotomy case, mentioned in my last, is doing well. Your obedient servant,

EDINBURGENSIS.

July 16, 1835.

NORTH LONDON HOSPITAL.

IRRITABLE STUMP.—AMPUTATION.—THE FLAP OPERATION AND ITS ADVANTAGES.

MARTIN O'DALY, aged 55, was admitted June 30, under the care of Mr. LISTON. About four years ago, his hand was severely lacerated by the fall of a stone, when he was taken to one of the London hospitals, where he remained about four months; and left it, with the hand still in a very bad condition. After this he was under the charge of several medical men, by the last of whom his hand was amputated, about six months from the date of the accident. The stump was a long time before it healed, and he has ever since suffered severely from the symptoms, to relieve which he applied for admission at this hospital about three months ago. At that time amputation of the stump was proposed, but he did not consent to the operation. He again made his appearance today, requesting that the stump might be removed, as he suffered so much from it that he could not follow his occupation. He complains of shooting pains in the extremity, which are much increased in cold weather, the slightest touch producing the most acute pain. He complains at one time of a sense of coldness and numbness, at another of burning heat. The cicatrix is large, and adherent to the bones, which are very imperfectly covered. His general health is somewhat impaired, and his countenance expresses considerable anxiety.

The operation was performed in the following manner. A flap of sufficient size was formed on the dorsum of the fore-arm, by an incision commencing over the edge of the ulna, and carried downwards, and then upwards, so as to terminate over the edge of the radius, opposite to the point where the incision had been commenced on the inner side; the knife was then passed across the anterior aspect of the arm, from the point where the in-

cision had terminated, to where it had commenced, and a flap corresponding to the other, by cutting from within, outwards, was formed. Four vessels were secured, and about an inch of the median nerve more than was taken off with the stump was removed. The flap was then dressed with isinglass, in the usual manner.

July 20. Has been going on well since the operation; about two days afterwards there was a little redness on the outer side of the stump, and one or two red lines were seen leading up as far as the elbow. They were removed by a purgative and diaphoretic. He is now quite free from pain, and the wound is very nearly healed.

Mr. Laston, in making some observations on this case, said that he preferred the flap operation to all others; he thought it generally afforded a better covering to the bone; the wounds were cleaner and healed much better than by any other mode. Operations of this description were required in cases where a sufficient covering of flesh had not been left on the stump, the nerves becoming enlarged, pressing against the bone, and producing great pain and irritation. This was the case with the present patient. He had once removed a stump from an individual who had submitted to amputation three times previously, but the stump was always irritable and painful; however, he succeeded by the plan he adopted in this case in permanently relieving him. He had also once had a case in which the tibia was left three or four inches longer than the fibula. In some cases the stump was too long, and on its becoming very inconvenient to the patient, the surgeon was generally requested to shorten it. With regard to the present case, there was little doubt, before operating, that the pain and irritation arose from the enlarged extremity of the median nerve, and the question was whether removing that alone would be sufficient for the cure; but the stump was not a good one, and there was risk in exposing the bone; he therefore determined on improving the stump, as well as relieving the pain, and thus preventing the necessity of any farther operation. It occasionally happened that the surgeon was not required to go through all the steps of the operation, but might cut from the inner side and then draw aside the flap and divide the bone.

DROPSY; JAUNDICE.—AUTOPSY.—EXTRAORDINARY APPEARANCES IN THE LIVER.

Charles Roberts, of emaciated appearance and weakly habit of body, was admitted June 16th, under the care of Dr. A. T. Thomson. He had suffered for the last six weeks from the usual symptoms of dropsy, and has now considerable enlargement of the abdomen, with evident sense of fluctuation. He lies best on the right side. He has no appetite, and is feverish, and his urine is scanty and high-coloured. Pulse 65. A purgative was administered; and some pills containing calomel and elaterium were given every six hours.

23. There has been little improvement, the swelling remaining much in the same state. Paracentesis abdominis was performed to-day, and a strong diuretic was administered.

26. The countenance and eyes have a bilious tinge; the urine is of a deep yellow colour, and scanty; there is slight tenderness on pressure, and pulsation at the epigastrium; bowels rather confined; pulse 110, weak.

July 3. Since last report, symptoms of jaundice have progressively advanced, with great and increasing debility. He is now rapidly sinking; the pulse is scarcely perceptible at the wrist, and the countenance displays a mixture of red lines, indicative of visceral disease. He died towards the evening of this day.

Autopsy.—The liver was enlarged, indurated, and thickly studded with brown tubercles, of a rounded form, and of various sizes, presenting the appearance of what is called "gin-and-spirit liver;" in addition to this there were seen on the surface of the organ tubercles of a large size and arborescent, containing a yellow matter. On examination this matter was found to be contained in the veins, which were dilated to an enormous size; but on taking out the substance, they did not appear to be diseased. The substance has been analyzed by Dr. Prout, who reports that it contains "some of the common biliary matter, but the bulk consists of a substance which is neither strictly albuminous nor biliary, but akin to both." He did not know what name to give it. Dr. Elliotson, in the absence of Dr. Thomson, that gentleman being on the Continent, had shown a portion of the liver to Mr. Kiernan, the author of the very elaborate work on the anatomy of that viscus, and that gentleman had once met with a similar case, but he believed that there was no other on record. Mr. Kiernan has a preparation of the organ. The gall-ducts were not impervious; the bile flowed freely on pressure; the smaller veins also contained a small quantity of blood. The kidneys were rather more vascular, and the peritoneum was rather more opake and thickened, than usual; the other viscera were healthy. Dr. Elliotson considered that the yel-

lowness of the matter found in the liver arose from general jaundice; in some parts, however, it was quite white, looking like tuberculous matter, and its texture was the same. He could scarcely believe it to be disease of the blood itself, for it was not found in other veins or arteries of the body, or even in those of the neighbouring viscera.

HYDRIODATE OF POTASH IN RHEUMATISM.

Dr. Elliotson has employed this medicine with considerable advantage in several cases of chronic rheumatism. It was administered in the case of a young woman who caught cold about eighteen months since, and who from that time had suffered from rheumatic pains in the joints at the various changes of the weather. On her admission into the hospital, May 26th, she had pains in her loins, shoulders, wrists, and ankles; the joints were not swollen, or preternaturally hot or red. Her general health was pretty good. Two-and-a-half grains of the hydriodate of potash were given in solution three times a day.

30. She has pain in the left side, increased on inspiration; she is obliged to lie on her back. Eight leeches are ordered to be applied.

June 2. The pain in the side is better, and the pains in the limbs are gone. She complains of headach and a sense of sickness.

6. The headach and sickness are gone, but the pains in the joints have returned.

23. Since the last report she has been improving, the dose of the medicine having been gradually increased to seven and a half grains. The pains have now entirely left her, and she was ordered to be discharged.

The other case is that of an old woman, aged 66, who was admitted on May the 12th. Twelve months ago she slept in a bed the pillow of which was damp, and she has since suffered with a severe pain in her neck, shooting up to the ear and into the head. Her strength has been much reduced by the constant pain, which has continually disturbed her rest at night. She took three grains and a half of the hydriodate on her admission, and has had the dose gradually increased to ten grains, which she was taking three times a day just before her discharge. On the 23rd of June she was very much relieved. There have been various local applications, such as iodine and croton oil made to the neck, but the effects of none of them were so striking as to warrant the belief that they administered much to the cure. Dr. Elliotson certainly considered that the benefit might be mainly ascribed to the hydriodate of potash.

TURPENTINE INJECTIONS IN AMENORRHŒA.

Two cases of amenorrhœa in this hospital have been completely cured by turpentine injections. The first was that of Emma Lloyd, aged 18, who was admitted April 28th, under the care of Dr. Elliotson. The catamenia disappeared about four months before, in consequence of her having caught cold. She was in good health; the pulse 72, and full; she is, however, subject to swelling of the ankles. She was immediately bled to twelve ounces; and an enema consisting of half an ounce of oil of turpentine and a pint of decoction of barley was ordered to be administered every day. On the 5th of May the catamenia appeared, and she was discharged on the 12th quite well.

The other case is that of Charlotte Wood, aged 16, who was admitted April 14th. The catamenia had disappeared about four months previously, without the cause being known. She appeared on her admission to be in good health; her pulse was 78, and rather full. Ten ounces of blood were drawn, and an injection similar to that which was employed in the last case was administered. The catamenia appeared on the 18th, four days after her admission. The enemata were discontinued, and the catamenial discharge ceased on the next day; they returned on the day following, and finally disappeared two days after that. She was bled to twelve ounces, and discharged quite well on May 12th.

Dr. Elliotson, in making some clinical remarks on these cases, said that he was induced to employ the turpentine injections in cases of suppressed menstruation from the circumstance of turpentine being considered an excellent emmenagogue when taken internally. He consequently thought that it might be successfully used in the form of enema in amenorrhœa, as it was known that when it is employed for the removal of ascarides it is much more effective when administered per anum, than when given by the mouth. He had employed this remedy in the case of a lady who was partially insane in consequence of the suppression of the catamenia. For eighteen months she had used all the established means for the removal of the disease, without effect, but the second injection of turpentine produced the menstrual discharge, and the insanity dependent on its retention was removed. It was not, however, always so

effectual. He had employed it in a case now in the hospital, without success. Two injections had been given daily for some time, but the catamenia had not appeared. He thought that he had given the turpentine a fair trial in that case, and had therefore discontinued it. He had since ordered a slight injection of the liquor ammon. subcarbon. per vaginam, as recommended by an Italian physician, but without as yet doing any good.

PROVINCIAL MEDICAL ASSOCIATION.

THIRD ANNIVERSARY MEETING, HELD AT OXFORD, JULY 23, 1835.

THE members and friends of this society (called by a superfluity of words "The Provincial Medical *and Surgical* Association") will be glad to hear thus early that the third anniversary meeting of the Association, held on Thursday last at the University of Oxford, has passed off in a manner which was highly gratifying to the gentlemen who were present at the scientific and very social festival. Not less than three hundred of the associate fellows and their friends attended the great business meeting of the day.

The proceedings connected with the occasion were divided into six parts. The first consisted of the assembly of the Council on Wednesday evening, to arrange operations for the next day; the second, of an assemblage of members at breakfast on Thursday morning at the *Angel Inn;* the third, of a demonstration, at ten o'clock, of the fossil remains which form the chief objects of interest in the Ashmolean Museum, by the Rev. Dr. BUCKLAND, the Professor of Mineralogy in the University; the fourth, of a union of the members and their friends in the Radcliffe Library at 2 o'clock, to receive the address of the President, the Rev. Dr. KIDD, Regius Professor of Physic in the University, — to hear read an Essay retrospective, of the medical occurrences of the past year, various reports and papers, and to elect new officers; the fifth division consisted of a reunion of the parties at dinner at the *Star Hotel* at seven o'clock; and the sixth of a Friday morning assemblage of such members of the Association as remained in Oxford during the night, at breakfast at the *Angel;* soon after which the whole of the non-residents departed to their several homes, which lay scattered in nearly all the counties of England, and even far wider. At the close of our report will be found a list of the gentlemen who attended the dinner, exceeding 200 in number, whence it will be seen that Scotland, Wales, Paris, and even America, helped to supply visitors on the present occasion. London also afforded a good share of medical gentlemen, to give evidence, by their presence, of the excellent feeling which prevails between the members of the profession in the counties and the metropolis.

It may also be mentioned that the "School of Anatomy," the "Botanical Garden," and the "Picture Gallery," were opened to visitors, with tickets issued by Dr. KIDD, and that the operation of lithotrity was performed in an able manner, by Mr. COSTELLO, before a very crowded audience at the Town Hall, the School of Anatomy not being sufficiently large for the spectators; on which occasion Mr. COSTELLO addressed the auditory on the subject of lithotrity, its powers, capabilities, and limits, in a discourse, which from the candour, clearness, and knowledge of his subject, did that gentleman much credit.

The party assembled to hear the "demonstration" of Dr. BUCKLAND consisted of about seventy gentlemen, as many as could find room on the crowded floor of the museum, and a most gratifying, instructive, and in many respects original demonstration, it proved to be. Indeed a more appropriate extemporaneous scientific discourse it never fell to our lot to hear. The audience appeared to have caught the professor at just such a moment, and heard him speak upon just such subjects, as an enthusiastic and highly-gifted lecturer would desire if he sought to excite, retain, and instruct. With good temper in his face, a gown on his shoulders, a wand in his hand, and a host of museum keys at his watch-chain, the professor urbanely greeted the crowd, took them at once to the cast of a portion of the vast megatherium, explained his own views of its structure and economy, and those of his contemporaries (some of them now elicited for the first time), demonstrated the plesiosaurus and many other strange fossil reptiles, took an expansive review of some of the more striking and exciting phenomena in the formation and habits of the fishes; exhibited the fossil remains of numerous tropical animals which formerly inhabited our own plains, described his volcanic theory of the earth's surface, and finally gave a very animated account of his cavernal discoveries, which, though not new, yet from the oral character of the details, his lively illustrations, the lucid mode of explanation, and the circumstances of the demonstration being

made from the identical objects of his discoveries, was as interesting as an original essay, even to those who were already familiar with the subject. Next week, when we shall have more space at command, we will endeavour to give—not exactly a report of the discourse, for that—so rapidly fell the words—would be beyond the reach of memory or art—but a characteristic sketch of the demonstration, which insensibly lasted two hours, without producing a symptom of fatigue in the audience.

At half-past one the whole body of members present met in the classical and beautifully-ornamented Radcliffe Library, an interesting and most apposite place of assembly, for around them, as Dr. CARRICK well observed, was "the Temple of Esculapius,"—*medicus erat hujus bibliothecæ fundator*. Here also were present many professional visitors, both medical and clerical. To the eye the effect was remarkably picturesque and beautiful, but to the ear, alas! a painful disappointment. The spacious tesselated pavement sustained in the centre a large round table, on which lay several copies of the Report of the Parliamentary Medical Evidence, volumes of the "Transactions" of the Association and the "Cyclopædia of Practical Medicine," and numerous papers, ink-stands, and water decanters. Opposite the entrance to the library, the President, Dr. KIDD, took his seat; on his right sat one of the secretaries, the able, laborious, never-wearying, Dr. HASTINGS; on his left Dr. PRITCHARD, of Bristol. On chairs and benches, circling round, sat the large scientific assembly of medical provincial and metropolitan practitioners, whose names we need not attempt to particularize, as the majority of them will be found in the list at the close of our notice. Amongst the medical men sat, variously distributed, numerous professors of the University, in their gowns. Around the mass towered, in exquisite proportions, the casts of many magnificent statues of antiquity. On the walls of the low-roofed aisle which forms a zone to the room, hung maps and lectorial drawings, and within were specimens of polished marbles, crystal slabs, and cases of gilded books. In the gallery above were other "libraries," some busts, and several smaller statues, spectators being ranged along the balconies, viewing the scene below, where so many venerable and youthful faces were complaisantly mingled in the light that shone through the windows of the echoing dome, which dome, like the unlucky lion that killed the benefactor whom he sought to serve, proved fatal to the very dome it should have served. Certainly more than one half of what was said beneath it, was inaudible to the assembly. Indeed, without shifting quarters at every change of speaker, and dodging all round the hall for places opposite the voice, no person present could make himself acquainted with the matters under consideration. The trifling noise of changing a place, or even of the very slightest movement of a chair, was thundered down again from the vault above in tones that crushed all sounds besides. To whisper was almost to roar, and to sneeze was to raise a hurricane. When a sonorous voice claimed attention, the purpose of the speaker was intelligible, but, unfortunately, by very far the longest of the addresses came from gentlemen who, there being no *flat* surface to return the sound, could not be heard within two yards of either side. We do not dwell on these annoying facts unnecessarily. The great object of the meeting was absolutely destroyed by them, and the prevention of similar occurrences will demand especial attention on a future occasion. We are bound also, in justification of our wish to be correct, to ascribe defaults and errors in the reported observations of the speakers, to the source of perplexity we have mentioned.

The business began by a very brief address from the president Dr. KIDD (who acted admirably and most efficiently in the chair), which being designed for publication by the Association, we do not attempt to report at length. The President having first offered his apologies for appearing before the assembly, alluded to the circumstance of their meeting in the Radcliffe Library, and then adverted to the positions respectively occupied by provincial and metropolitan practitioners. The professional advantages attaching to the former were superior, as he thought, to those of the latter, inasmuch as the difficulties of country practitioners were greater, and they were thrown more on their own resources, though he said this with no kind of disrespect for the profession in the metropolitan cities. With regard to the additions of provincial practitioners to science, he was sure that a record of their experience would be the means of accumulating an unexampled mass of matter for instruction and guidance in the practice of medicine; and as for qualities of the heart, in addition to those of mind, which distinguished them, he would but appeal to their uniform kindness to the poor, the consideration with which they continually forewent a due remuneration from the rich (too often, perhaps, through fear of resentment if they pressed their claims strongly), and the extreme moderation of their demands

on the middle classes of society,—these afforded evidences which placed that portion of the profession in the very highest rank amongst kind and humane individuals. He wished them all the honours and wealth that could accrue to their exertions, and sure he was that whatever benefits the future had in store for them would not be derived on unjust or undue grounds. He had in conclusion a most interesting duty to perform. Had Dr. Abercrombie been able to be present from Edinburgh, his (Dr. K.'s) feelings would have derived a double source of pleasure; his gratification, however, must be confined to announcing, and thus publicly presenting the result, to Dr. H. Pritchard, that the University of Oxford had conferred upon him the high honour of a degree, without "consideration" of any kind, which less than eleven years of classical servitude and application would not otherwise have procured for him. (The President then placed in the hands of Dr. Pritchard the parchment manuscript which constitutes the personal token of the honour conferred upon him. The presentation was loudly applauded.)

Dr. HASTINGS then read the Report of the Council for the past year. It stated that the members had increased from four hundred and fifty to five hundred; that the finances of the Association were in a most favourable state, the receipts being 511*l.*, the expenditure 349*l.*, and the balance 161*l.*; urged punctuality in the payment of subscriptions; stated that the scientific contributions continued to be as numerous as heretofore, and expressed a belief that the third volume of the "Transactions" was well calculated to sustain the credit of the Association; pressed on the members the importance of drawing up topographical essays and attending to medical statistics; pointed out the necessity for researches into the initiatory states of disease, and the imperfections existing in medical nosology in consequence of maladies not often enough coming under notice in their earliest stages; showed how much the prophylaxis of disease would be improved by reform in these respects; quoted some illustrative passages on the subject from Dr. Clark's late writings on tubercular consumption, and urged inquiries into the nature of the tuberculous diathesis in the parent; offered some other judicious recommendations to members on scientific matters; adverted to the reports of committees which were last year appointed to inquire into various medical matters; said that as to some of them more time was demanded for their completion; suggested the nomination of a committee to consider the mode of administering medical relief to the sick poor under the Poor-Law Commissioners agents (here there were several rounds of applause); and adverted to reports on the formation of a permanent provincial library, and an eleemosynary association fund. The Association, it stated, stood on a proud pre-eminence, and had already done much good, and urged, in conclusion, the formation of district medical societies in aid of general reforms in scientific matters, and affairs of medical governance and regulation. Much applause followed the perusal of the report.

Dr. JOHN JOHNSTONE, of Birmingham, then moved that the report be printed, and that each other report be received. He was rejoiced, he said, to find the Association assembled in the seat of the muses, the resort of sages, and the sanctuary of learning,—bound as it was to all civilized nations by the bonds of reverential feeling, and to Englishmen especially by ties of almost filial reverence. They had not assembled to serve the purposes of selfishness, but to enlarge the volume of science, and diminish by their labours the mass of human misery. It could not be forgotten, also, that they were united under a dome erected by medical munificence, whence the genius of the place must look down upon them with approbation, and feel delighted at the object to which the building was at that moment devoted. (*Applause.*)

Dr. CARRICK, of Bristol, seconded the motion in a speech of which we regret to say not a single sentence but the last was audible, except (as in all other such instances) to those who were close to the venerable doctor. He could not hope, he said, to be long amongst them, and he would therefore seize the opportunity in this solemn Temple of Esculapius of giving them the blessing of an aged man. (*Applause.*)

Dr. PRITCHARD, of Bristol, then rose to read the "Retrospective Address," but we can say respecting it little more than that, judging from the occasional parts of the discourse which reached our ears, it seemed calculated to form an interesting portion of the next volume of the "Transactions." The paper was exceedingly long, and appeared to extend much farther backward in its notice of medical occurrences than the "past year." Of the first portion, hardly an entire sentence crossed the table to the right or left. It seemed to be explanatory of certain principles of medical study and reasoning, and contained an exposition of "four methods of investigating diseases." This portion of the document was, to our mind, much too long for the occasion; and such seemed

also to be the impression of Dr. Pritchard, as he twice skipped passages in which he had illustrated his views,—once in relation to some points of pathological anatomy, and again, on coming to some details respecting the discoveries of Dr. Bright in the kidneys. As the paper drew to a close, it treated briefly of the doctrine of homœopathy, in condemnatory language; adverted to the kreosote as a new medicine, and spoke of the evidence offered in its favour as being rather "too strong;" remarked on the latest improvements in the operations of surgery—on the excision of the uterus, as one "not encouraging;" on lithotripsy, very briefly; and on Amussat's torsion of arteries, as the greatest surgical invention of modern times. Of medico-political matters Dr. Pritchard said little, and nothing to be quoted; statistical medical inquiries he strongly advocated; he adverted to the subject of quarantine and contagion, as matters needing much reconsideration; reviewed the newest matter on the cholera; and, finally, presented an analysis of late inquiries into the powers of vaccination and into secondary small-pox. The paper concluded amid loud applause. A year seems a long time to wait for the publication of such an essay, especially after the unlucky dumbness of the show which characterized its perusal.

Sir CHARLES BELL, in a brief but almost inaudible eulogy on Dr. Pritchard's address, moved that it be printed, which was seconded and carried.

Mr. TUDOR rose to propose the President for the ensuing year. In accordance with the rules of the society, he said, a surgeon and physician were required to be alternately placed in the chair, and, in consequence, a surgeon of Manchester was named on this occasion, but as that gentleman belonged to the Society of Friends, and was therefore voluntarily incapacitated from taking the chief seat at a public dinner, he declined, and the Council, therefore (not applying to another "surgeon"), addressed themselves to Dr. Holme, of the same town, that gentleman accepting the office, subject to the result of the motion now made. The next meeting is to be held at Manchester.

Mr. CROSS, of Norwich, seconded the nomination, which was carried unanimously.

Dr. BARLOW, of Bath, moved the thanks of the meeting to Dr. Johnstone, the late President. Seconded and carried.

Dr. CONOLLY, of Warwick, moved a vote of thanks to the Secretaries, and that they be requested to continue in office. Seconded by Mr. HETLING, of Bristol, and carried.

Mr. COOMBS, of Birmingham, proposed the thanks of the meeting to the Council for the many anxious hours of labour and attention they had given to the business of the Society. Seconded and carried.

Thanks were voted for services to Dr. SCOTT, of Liverpool, and parts were taken in the proceedings by Dr. SIMMONDS, of Bristol, Dr. SCOTT, Mr. WHEATLEY, Dr. BOMPAS, Dr. HOLME, and other gentlemen whose names we did not hear, and whose remarks, as well as all those of the gentlemen personally mentioned, were inaudible at a few yards distance from the speakers. A report was read by Dr. SCOTT on the propriety and practicability of connecting a benevolent fund with the Association, which terminated in adjourning the subject for a year, as the plans for acting on the proposals made were as yet immature.

Mr. BECKENDEN read the report of the committee on the formation of a Provincial Association Library; but the difficulty of circulating the books, and the uselessness of keeping them fixed to one spot, led the Committee, as we understood, to recommend that the library should not be formed.

Dr. CONOLLY, of Cheltenham, submitted to consideration a plan for forming a medical charitable fund, to which several donations of 20*l.* had already been subscribed. We did not understand that the measure now went beyond Dr. Conolly's hands.

Mr. HEAD, the secretary for foreign correspondence, read the greater part of a very long paper on the autumnal epidemic fevers of Amsterdam, by Dr. Niewenhuys, which was received by the Society, but we are sorry to say that we did not hear one word of its contents.

Mr. GRIFFITHS moved that a committee be formed to inquire into the medical treatment of the sick poor of this country, and report thereon at the meeting in 1836. The committee was named and appointed.

Mr. SMITH, of Southam, read a paper on the destitute condition of diseased paupers in England, and the necessity for establishing means for their relief. He assured the meeting that no measure but the universal diffusion of his "self-supporting dispensaries" would redeem the pauper population from the fangs of the Poor-Law Commissioners, or procure justice to the medical profession as their attendants. If we remember rightly, Mr. Smith's plans produce, when in full operation, an average of about five farthings annually of remuneration to each practitioner for each patient whom he has attended at the oddly-named "self-support-

ing" dispensary. We do not wish here to say one word that is offensive to Mr. Smith, who at least is a very zealous man, and, like all enthusiasts, calculated to do some harm where the principles of operation advocated are incorrect; but we must confess our surprise at the unmoved aspect of that gentleman when Mr. Ceely was so affectingly detailing those miseries of the sick poor which directly spring out of the inadequate remuneration of medical practitioners.

Mr. CEELY, of Aylesbury, read an excellent paper on the subject last mentioned, and reported the answers which had been forwarded to the Buckinghamshire Medical Association by the Poor-Law Commissioners, the College of Physicians, and the Company of Apothecaries, in reply to applications for assistance to procure relief against the new contract regulations.

Mr. WICKHAM, of Winchester, Mr. LUARD, Dr. ROBERTSON, of Northampton, and Mr. MORRIS, of Worcester, took parts in motions, all of which were carried, relative to business of various kinds. One related to a future paper on the state of our knowledge on the pathology of continued fever; another related to the remedial powders of iodine; a third to a vote of thanks to Mr. Head and his Dutch correspondent; a fourth included thanks in high terms to Dr. Buckland for his morning demonstration; and a fifth requested a vote of thanks to the authorities of the University, for the attention they had shown to the Association on this occasion, and the readiness with which they had promoted its objects in Oxford.

Dr. HASTINGS, then, having moved that Dr. J. JOHNSTONE do take the chair, proposed a vote of thanks to Dr. Kidd for his zeal and urbanity as President of the Association. On all occasions, he said, Dr. Kidd had shown the utmost anxiety to further its objects, and most useful had been his exertions. He (Dr. H.) regarded it as singularly fortunate that there existed in the University of Oxford a gentleman holding so high a situation, who was so warmly alive to the spirit of the times, and so desirous of promoting the progress of knowledge generally, and the science of medicine in particular; and most happy was he that the Association had this day possessed the influential exertions in its favour of that gentleman.

The motion was seconded by Mr. ADDISON, of Malvern, and carried amid three rounds of applause.

Dr. KIDD returned thanks in a single sentence, and the meeting separated to prepare for dinner, the assembly having been sitting during nearly five hours.

The crowd of business to be transacted on this occasion, prevented all opportunities for the discussion of any of the subjects brought under notice; and, indeed, it could not fail to strike every observer, that two days would have been well devoted to the purposes of the meeting. We should add, that any errors, arising from the din of the library, which appear in our notice of the motions and the names of the speakers, we shall be glad to correct in our next number.

THE DINNER.

The reunion of more than 200 members of the Association and their friends took place in the great room of the *Star Hotel*, at seven o'clock, when Professor KIDD once more presided, and performed the duties of his office in a manner which again excited general gratification. He was supported on the right by Dr. Pritchard, Dr. Carrick, and Dr. Talret, and on the left by Sir Charles Bell, Mr. Costello, and Dr. Holme. At one of the side-tables sat the Vice-Chancellor of the University, and three reverend Doctors, Principals of Colleges, and several clergymen and professors in the University were distributed in other parts of the room. All the toasts were proposed from the chair.

The first toast was "The King and the Royal Family," which was drunk with the usual honours, the band in the orchestra playing an accompaniment to the first verse of the national anthem, cheerfully sung by Mr. Hitchins, one of the vice-presidents, to the great satisfaction of the company, who aided the volunteer by a general chorus.

The CHAIRMAN said he had been reminded of a seeming omission in the last toast. He did not, however, regard any words as omitted, having employed a comprehensive toast with a view to save time, as a very long list had been placed in his hands, and he was informed that the great majority of the assembly proposed to adjourn at an early hour to the ante-room, there to shake hands, over another kind of social beverage, with friends whom the business of the day had kept apart. (*Universal approbation.*) He would now at once propose the next toast—"The Provincial Medical and Surgical Association, and the health of its excellent founder Dr. Hastings." (*Great applause.*)

Dr. HASTINGS rose to return thanks for the kind and enthusiastic mark of estimation shown to him. When, gentlemen, he said, three years ago you placed so much confidence in me as to assist me in carrying the plan of this Association into execution, I proposed to myself no higher

reward than that of seeing it receive the support of the influential class of provincial medical practitioners, and I simply hoped that they would derive the reward which their object entitled them to receive. The triumphant progress of the Association has now outstripped even my most sanguine expectations, and I am indeed proud to be regarded by you as its founder, an honour of which I will ever endeavour to prove myself worthy. Yet this is only one portion of my recompense. But for this Association how many hours should I have failed to pass with old and far-distant friends, thus losing a source of pleasure which has been higher to me than wealth, honours, or titles! I am delighted also to spend the third anniversary of the Society in Oxford, under the auspices of the urbane and excellent Dr. Kidd. I have spoken to you of our success. To what can it be attributed, but to the admirable zeal of the great body of the Society? I, as an individual, could have had little effect in pushing so far forward this vast machine in so short a time. It is not much more than three years since I came to this very city to meet the British Association, when Oxford showed so deep an anxiety to promote the progress of science. I see around me several friends whom I saw present on that occasion, and I well remember our lamenting the want of such an association as this in the medical profession. I am sure they all with me feel delighted at the result. I will detain you no longer, but as one deeply interested in the prospects of the Society, I respectfully urge on its members the continued advancement of medical science, and the consequent security of the Association on a permanent basis. I again return my best thanks for the compliment you have paid to me. (*Great applause.*)

The CHAIRMAN.—Reconciliation among individuals is truly delightful. How much more so is it between nations! You will perhaps wonder to what my illusion is made. There are individuals connected with the medical schools of three nations present. I have just been introduced to Dr. Talret of Paris, and Dr. Sweetser of Boston in America. We can recollect the historical facts (too well known alas!) of the wars in which England, France, and America, have mingled, only to regret them, and I trust I am not too romantic when I say that I hope to see the dawn of that happy day when peace and harmony shall prevail throughout the entire world. I propose "The Medical Schools of America, Paris, and the whole of continental Europe." (*Applause.*)

Dr. TALRET returned thanks, apologizing for not being able to do so in the language of his auditors. His countrymen fully appreciated the talents of the English, and he was proud to find that the feeling was reciprocal.

The CHAIRMAN.—I have not yet done with foreign associations, though I have not far on this occasion to go for a toast. An absurd opinion has prevailed that this Society was only intended to emulate the metropolitan societies. Nothing, I am sure, can be more untrue. It is true that metropolitan practitioners cannot belong to this Association, but it ever rejoices to see them, and especially men of such character as we have here to-night. I propose "Dr. John Sims, and the practitioners of the metropolis."

Dr. SIMS (the other London gentlemen also rising) returned thanks. As to animosity or jealousy in London towards medical practitioners in the country, or towards this admirable Association, if such existed, neither he nor any of his metropolitan friends present, he was assured, participated in, or, indeed, were at all conscious of its existence. He could distinctly say that it gave them the highest gratification to see such societies flourish all over the kingdom. (*Much applause.*)

The CHAIRMAN. — Gentlemen, "The health of Dr. John Johnstone, the late president of the Association," a man whose medical and literary attainments are amongst the highest in the profession, and whom I am this day proud to rank amongst my friends.

Dr. JOHNSTONE returned thanks. He was especially gratified by the kind and condescending manner in which the toast had been framed. He had met the Association with great pleasure during two anniversaries. The connexion on his part could not last long; but he trusted the members would long live to enjoy every happiness. In return he begged to propose the health of the chairman, in connexion with the University, for he could do so without degrading either. Dr. Kidd was one who had made science successfully plead the cause of virtue and religion. (Drunk with three times three cheers.)

The CHAIRMAN said it would be no easy task for him to return thanks, even for himself, and he was prevented thanking them for the University, by the presence of some of its most distinguished members. Yet the encouragement he had received since he entered the University, he should ever be proud to acknowledge. He had possessed friends, but from them he had but few expectations. For the remainder of his life he could retire with independence; more than that he could not do,

but the means of doing that were wholly derived from the fostering aid of the University. The habits of the University did not generally admit of its members entering into social festivities such as these, and he was happy therefore that so great a compliment had been paid to the Association by the presence of so many members of the University, and he hoped that when the Association had visited the rest of the provincial cities, there would be again as many distinguished members of the University to receive the medical profession in Oxford. He begged to propose the "Vice Chancellor and the several Heads of Houses of the University." (Drunk with three rounds of applause.)

The VICE CHANCELLOR (Dr. Gilbert), and the Rev. Drs. MACBRIDE, INGRAM, and DAUBENY, rose together, when Dr. GILBERT thus spoke:—Mr. President and gentlemen, members of the Provincial Medical Association, with unfeigned thanks I acknowledge the kindness shown to us individually, and I equally acknowledge the honours paid to the University, which although the learned President did not feel himself authorized to repay, yet I could wish had been left in his hands. The approbation of such an institution as the University, expressed by a society of gentlemen of education, talent, and judgment, and of a rank which especially qualifies them to form a knowledge of the value of education, is particularly gratifying. Well assured am I that the compliment is chiefly merited by the manner in which the institutions of this University are constituted. It is from a feeling of respect to this Association, and as a token of regard towards its respected President, that my brethren and myself are now present. I will detain the assembly no longer than again to return my respectful and grateful thanks for the honour that has been paid to us. (*Much applause.*)

The CHAIRMAN.—"Dr. John Johnstone and the Vice Presidents." Dr. John is the worthy and venerable elder brother of Dr. James, and in no man is age combined with greater amiability of manner, or more virtuous conduct.

Dr. CARRICK returned thanks, and was sorry that Dr. John Johnstone was not present.

The CHAIRMAN.—"Dr. Pritchard, and thanks for his admirable address." (*Drunk with three cheers.*)

Dr. PRITCHARD said he had trespassed so long on their attention already to-day, that he would simply express his thanks for the toast.

The CHAIRMAN then severally proposed the following toasts:—"Sir Charles Bell and the other honorary members of the Association." Drunk with three times three, Sir CHARLES briefly returning thanks.

"The Secretaries, Dr. Hastings and Mr. Shepherd." Mr. Shepherd was absent, and Dr. HASTINGS briefly acknowledged the compliment.

"Mr. Head and the Foreign Correspondents." The quickness with which he proposed toasts, the CHAIRMAN said put him in mind of the children's rapid game of hands over hands, and though (in allusion to Dr. Niewenhuys) Mr. Head's foreign correspondence that day had not been so entertaining as the one produced by him at the last anniversary, yet it was the lateness of the hour at which it was read that had interfered with its interest. Mr. HEAD briefly returned thanks.

"The absent members." Letters from Mr. Hodgson, Mr. James, and other Gentlemen, were mentioned, expressing regret that they could not be present.

"The President elect." Dr. HOLME returned thanks.

"Dr. Conolly, and the Societies in the provinces." Dr. C. returned his warmest thanks in a brief speech, in which he said he was proud to meet on these occasions the "nobility of the profession," the "centres of purity and truth of the circles in which they resided."

"Mr. Hetling and the Provincial Medical Schools." Mr. HETLING expressed his gratification, especially from the high character of the proposer, and the circumstance of the toast being given in the presence of one of the most distinguished teachers in Europe (Sir C. Bell). He had with a friend been requested by the Association to draw up an account of the provincial schools, but it was not yet ready. He would now just mention, that he had lately heard from Mr. Turner, of Manchester, that the class of anatomy in that town numbered 90 students; that of Bristol consisted of 60, and that of Birmingham was nearly the same. (*Applause.*)

"Mr. Hitchins and Mr. Wingfield, of Oxford, the Vice-Presidents." Each gentleman returned thanks, and they said they should be always glad to promote the objects of the Association.

The CHAIRMAN said he had but one more toast to propose. "The health of Mr. Costello," who had come down that day to show them a most important operation. (*Drunk with three cheers.*)

Mr. COSTELLO said that the illustrious examples of that evening had all been in favour of brevity, so he would shortly say in returning thanks, that he was sure tha

the appreciation of his labours was in good and competent hands. (*Cheers.*)

Dr. CARRICK then proposed "The President, with three cheers," which the worthy Doctor led, immediately after which the entire company adjourned to the tea and coffee-room, the hour being a little past 10 of the clock. In another hour the assembly had all sought their carriages or their beds.

The following is a list of gentlemen who were present at the dinner:—

Addison, Mr., Malvern.
Alexander, Mr.
Allen, Mr. Oxford.
Alsop, Mr., Watlington.
Bagnall, Mr., Chester.
Bailey, Mr., Chippenham.
Bandwell, Rev. Dr., Oxford.
Barlow, Dr., Bath.
Barnett, Mr., Stourport.
Batt, Mr., Abergavenny.
Baron, Dr., Cheltenham.
Bell, Sir C., London.
Best, Mr.
Bevan, Dr., Monmouth.
Billing, Dr., London.
Blackmore, Dr., London.
Bleechlye, Dr., Hereford.
Blenkinsop, Mr., Warwick.
Bodington, Mr. Wm., Kenilworth.
Bodington, Mr. Geo., Eldington.
Bompas, Dr.
Boulton, Mr.
Brayne, Mr., Banbury.
Brickwell, Mr. J. C., Banbury.
Brookes, Dr., Henley.
Brown, Dr., Newbury.
Bunny, Mr., Newbury.
Carrick, Dr., Bristol.
Cecly, Mr., Aylesbury.
Chapman, Mr.
Cheatle, Mr., Burford.
Clark, Dr., London.
Clark, Mr. Henry.
Claughton, Rev. Mr., Trinity, Oxford.
Colborne, Mr.
Coles, Mr., Woodstock.
Coles, Mr., jun., Woodstock.
Conolly, Dr., Cheltenham.
Conolly, Dr., Warwick.
Costello, Mr., London.
Coulthas, Rev. R., Queen's Coll., Oxford.
Cowan, Dr., Bath.
Cox, Mr., Aldermaster.
Crang, Mr.
Cross, Mr., Norwich.
Daubeny, Dr., Principal of Oxford.
Davis, Mr. W.
Davis, Dr., Presteigne.
Davies, Mr., Bristol.
Davies, Dr., Bristol.
De Jersey, Mr., Guernsey.
De Jersey, Mr. G., Guernsey.
Field, Dr., Worcester.
Fisher, Mr., Oxford.
Flesher, Mr. James, Aylesbury.
Fletcher, Mr., Croydon.
Forbes, Dr., Chichester.
Fowke, Mr., Wolverhampton.
Fowke, Mr. T. H., Wolverhampton.
Fox, Dr., Bristol.
Fripp, Mr. G. B.
Fryer, Mr. J., Bewdley.
Gilbert, Dr., Principal of Brazennose, Oxford.
Godfrey, Mr. J., Charlbury.
Gould, Rev. J., Magdalen College, Oxford
Graham, Mr., London.
Grainger, Mr., Southwark.
Griffiths, Mr., Hereford.
Griffiths, Mr. T. T.
Hall, Mr., Bath.
Hardwick, Dr.
Harrison, Mr. George, Chester.
Hastings, Dr., Worcester.
Hayward, Mr. William, Aylesbury.
Hay, Mr., Leeds.
Heathcock, Mr., Reading.
Hebb, Mr. C. H., Worcester.
Hester, Mr. J. T., Abingdon.
Hetling, Mr., Bristol.
Hetling, Mr. George, Bristol.
Hitchman, Mr., Leamington.
Hitchings, Mr., Oxford.
Hodger, Mr., Bath.
Hodgkin, Dr., London.
Holbrook, Dr., Crickhowell.
Holme, Dr., Manchester.
Holmes, Mr., Kidlington.
Holmes, Mr. J. P.
Hungerford, Dr., Bath.
Ingram, Dr., Pres. of Trin. Coll., Oxford.
Jeston, Mr., Henley.
Johnson, Mr. H., London.
Johnston, Mr.
Johnstone, jun., Dr. James, Birmingham.
Johnstone, Dr. John, Birmingham.
Johnstone, Dr., Shrewsbury.
Jones, Mr., St. Leonards.
Jones, Mr. Richard.
Jones, Mr. G., Henley, near Arden.
Jordon, Mr.
Kent, Mr. F., Radley.
Kent, Dr., Walsall.
Key, Dr.
Kidd, Dr., Oxford.
Kidgill, Mr., Panybourn.
King, Mr. T. W.
Knight, Mr. Thomas, Bath.
Letman, Dr., Berlin.
Lloyd, Dr., Leamington.
Lowett, Mr. Nicholas J., St. George's.
Luard, Dr., Leamington.
Lupton, Mr. H.
Lupton, Mr., Thaine.
Macbride, Dr., Principal of Magdalen Hall.
Malden, Dr., Worcester.
Margett, Mr,

Martin, Mr., Reyate.
Martin, Mr.
Mast, Mr., Northampton.
May, Mr. G., Reading.
Michel, M., Paris.
Mills, Mr. G., London.
Morris, Mr., Worcester.
Nankiock, Mr., Coventry.
Norman, Mr.
Nott Rumsey, Mr., Beaconsfield.
Nunney, Mr. Henry, Chesham.
Osmond, Mr.
Owen, Mr. Richard, London.
Palmer, Mr. H., Woodstock.
Parker, Mr. C. Lewis.
Parry, Mr., Leamington.
Paxton, Mr., Oxford.
Perry, Mr. Henry, Henbury.
Prichard, Dr., Bristol.
Pytt, Mr., Burford.
Robertson, Dr., Northampton.
Rose, Mr., High Wycombe.
Rumsey, Mr. H. W.
Rusher, Mr., Oxford.
Sainsbury, Dr. W., Corsham.
Scott, Mr. E. D., Queen's Coll., Oxford.
Scott, Dr. R. W., Liverpool.
Sealy, Dr., Hungerford, Bath.
Slater, Mr. C. H., Bath.
Smith, Mr., Wheatley.
Smith, Mr. N., Bristol.
Smith, Mr., Southam.
Simmonds, Dr., Bristol.
Sims, Dr., London.
Somerville, Dr., London.
Squires, Dr. William, Liverpool.
Stevens, Dr., Ely.
Stockwell, Mr.
Stone, Mr. D., Oxford.
Streton, Dr.
Sweetser, Dr., Boston, America.
Swinburne, Mr., London.
Symonds, Mr. J. A.
Talret, Dr., Paris.
Taylor, Mr., Wagram.
Thomson, Dr., Bradford.
Todd, Dr., Finden.
Tuckwell, Mr., Oxford.
Tudor, Mr., Bath.
Underwood, Mr., Ross.
Vincash, Mr. S. W., Stadhampton.
Wakeman, Mr.
Wallace, Mr. Edward.
Webb, Mr., Oxford.
Welchman, Mr., Kineton.
Westward, Mr. R., jun.
Wickham, Mr. W., Winchester.
Williams, Mr.
Wilson, Professor.
Wilson, Mr. H.
Wilton, Mr. J. W., Gloucester.
Wingfield, Mr., Oxford.
Wood, Mr., Bath.
Wood, Mr. John P., Oxford.
Workman, Mr. Thomas, Basingstoke.
Zacharia, Dr., Hiedelberg.

It is possible that the above list is not in every particular correct, as it has been made out in most instances from autograph signatures recorded with the vile pens of a tavern bar. We shall be glad to correct any errors of omission or commission that may be pointed out to us. It does not include several names of persons whose attendance was signified in the secretary's book as that of "friends" of members.

ST. BARTHOLOMEW'S HOSPITAL.

CHOREA.

S. Sanes, ætat. eighteen, was brought to Mary's ward, April 30th, exhibiting the following appearances. The countenance pallid; tongue moist, pale, and slightly furred; the features constantly distorted, and the face somewhat drawn to the right side. The right arm and leg are more affected than their fellows; pulse 160 in a minute, and jerking, particularly so in the right wrist; skin warm. She suffers no pain, save in the head, which at times is very severe, and is referable to the temples; she is frequently attacked by alternations of rigors and flushing heats. She states that her limbs are more tranquil whilst she is walking, or when they become very cold. Her bowels are regular. About a week ago the catamenial discharge made its appearance, but suddenly disappeared; and since that period she has suffered considerable pain in the loins, shooting down to her lips; she says that she experienced headach for some days about three weeks before this period, and that she was bled very largely in consequence, and that "ever since she has had cold feet." *C. C. Nuchæ.* A calomel and jalap purge.

May 4.—The pain of the head is very much relieved since the cupping; the bowels have been opened several times, and the stools are very dark and offensive; the tongue is clean; and the skin warm and moist. There is much less involuntary motion of her limbs. Fifteen grains of the carbonate of iron to be administered three times a day; a dose of aloes with soap to be given every night.

19. She has regained complete power over her muscles, and is in every respect well enough for Dr. Latham to discharge her to-morrow.

ABSCESS IN THE SIDE COMMUNICATING WITH THE LUNG.

Elizabeth Inskipp, æt. 27, a married woman, was taken into Mary's ward May 21, under Dr. LATHAM. She states that she has always enjoyed excellent health

until within the last three years, at the commencement of which period she contracted a syphilitic disease from her husband. Of this she was relieved by a course of medicines, and again became healthy and robust. She continued so until about a year since, when her menstrual discharge was suppressed. Six weeks previous to her admittance she became the subject of a severe shivering fit, accompanied by sickness and vomiting; these symptoms were succeeded by general fever, and cough attended by expectotion, and during the last two weeks she has observed the sputa to be streaked with blood, particularly after a severe fit of coughing; she has not been subject to affections of the lungs. Her countenance is slightly flushed; skin hot but moist; tongue furred in its centre; pulse 120, small, compressible, with a slight jerk; bowels not open to-day; has no appetite; is very thirsty; perspires freely at night; her cough is frequent and distressing, keeping her awake during the night; it is attended by copious expectoration of mucus, but no pain save at the right side during a deep inspiration; her catamenial flow has been arrested for two months. *Auscultation.*—There is more air admitted into the left than the right lung, and of this the respiratory murmur is more perceptible at its lower portion than its upper; percussion, however, produces no perceptible difference. Is ordered twelve leeches beneath the right clavicle.

23. Pain somewhat abated by the bleeding; cough still troublesome; watchful at nights; a calomel and jalap purge.

25. No perceptible change; the cough produces pain in the right side beneath the seventh rib.

27. *In statu quo.* A sixth of a grain of acetate of morphia and a drachm of oxymel of squills are ordered every six hours, and eight leeches to the painful side.

28. Is relieved from the pain; is much the same in other respects.

30. The point to which the leeches were applied now presents a small circumscribed tumour, very tender on pressure. Two bottles of soda water to be given daily.

June 6. The swelling in the side is less circumscribed, occupying a larger space; it is not quite so tender as it was on its first appearance; the pulse is 112 and feeble, and she perspires more at night.

9. She expectorated a considerable quantity of fluid this morning, and the swelling is apparently less; the tongue is dry and red; pulse feeble and small; the pain in the situation of the tumour is diminished. On auscultating the chest the respiration appears natural in the upper part of the right lung behind, but just below the scapula opposite the tumour, in front, a large crepitation is heard.

10. About a quarter of a pint of purulent matter was expectorated last night, but without its affording any apparent relief to the patient's feelings; her night had been very watchful and restless, more so than any since her admission; the tumour has increased in size. Oxymel of squills is prescribed. At two o'clock an assistant opened the tumour and forthwith a quantity of pus escaped, mixed with some bubbles of air.

18. The expectoration has greatly diminished; there is less pain in the side; the cough is better; tongue clean; pulse 90 and small; bowels regular; nights restless. The incision is kept open by a tent, but the discharge is very trifling. A blister is ordered to the chest.

22. Her bowels have been opened by an injection, by which she is much relieved. The pectoral symptoms continue to improve, though her pulse has increased to 112, and there is some heat of skin.

24. There is great defect of respiratory murmur observed at the back of the right lung occasionally; there is bronchial respiration and bronchophony; these symptoms likewise obtain on auscultation of the front of the thorax on the right side. Sulphate of magnesia with infusion of roses to be administered three times daily.

29. The cough and expectoration have ceased; the incision in her side has closed, and she is free from complaints.

July 3. There is much more vesicular breathing in the right lung, but still it admits less air than the left; the bronchial respiration and bronchophony remain at about the angle of the scapula. The dullest sounds are observable in the axilla and below the mammæ.

4. Is discharged cured.

CORRESPONDENTS.

Rusticus.—We do not know how to obtain the information more satisfactorily or quickly than our correspondent. The application might be successfully addressed to the editor of the *Mechanic's Magazine.*

Observator (North London Hospital) has not complied with our request made last week.

A correspondent informs us that the following verdict was received and recorded by a non-medical Coroner at an inquest lately held in the country:—"Died *suddenly* of *slow* inflammation."